

VIOLENCE RESTRAINING ORDER APPLICATION

PERSON SEEKING TO BE PROTECTED

Family Name	Other Names		
Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Is the Respondent aware of this address?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Home Address Street			
Suburb		Postcode	
Phone Numbers Home Work Mobile			
<i>Person Seeking to be Protected Ethnicity</i>			
<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Chinese	<input type="checkbox"/> New Zealander	<input type="checkbox"/> Other (Please Specify)
<input type="checkbox"/> Australian	<input type="checkbox"/> Indonesian	<input type="checkbox"/> Turkish	
<input type="checkbox"/> Arabic	<input type="checkbox"/> Italian	<input type="checkbox"/> Vietnamese	
<input type="checkbox"/> British	<input type="checkbox"/> Maori	<input type="checkbox"/> Yugoslav	

RESPONDENT (Person who would be bound by the Restraining Order)

Family Name	Other Names		
Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Home Address Street			
Suburb		Postcode	
Work Name			
Work Address Street			
Suburb		Postcode	
Phone Numbers Home Work Mobile			
<i>Respondent's Ethnicity</i>			
<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Chinese	<input type="checkbox"/> New Zealander	<input type="checkbox"/> Other (Please Specify)
<input type="checkbox"/> Australian	<input type="checkbox"/> Indonesian	<input type="checkbox"/> Turkish	
<input type="checkbox"/> Arabic	<input type="checkbox"/> Italian	<input type="checkbox"/> Vietnamese	
<input type="checkbox"/> British	<input type="checkbox"/> Maori	<input type="checkbox"/> Yugoslav	

Application Details

Description of Respondent's Behaviour:

What is the relationship between the Person protected and the Respondent	<input type="checkbox"/> Married	<input type="checkbox"/> Related
	<input type="checkbox"/> De facto	<input type="checkbox"/> Other – Please specify
Are there any current family orders relating to the respondent's rights in relation to children who may be affected by a restraining order?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unknown
Are there any current Family Court proceedings in which such orders are being sought?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unknown
Does the respondent have a firearm or firearms licence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unknown
Does the respondent have access to a firearm at work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unknown
Do you want this application heard in the absence of the Respondent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Grounds for making this application for a Violence Restraining Order

Why do you need a violence restraining order? To prevent the respondent from:

(Tick the appropriate box.)	<input type="checkbox"/>	committing an act of abuse against the person seeking to be protected
	<input type="checkbox"/>	behaving in a way that could reasonably be expected to cause fear that a person seeking to be protected will have an act of abuse committed against him or her
	<input type="checkbox"/>	exposing a child to an act of family and domestic violence; or
	<input type="checkbox"/>	behaving in a way that could reasonably be expected to cause fear that a child will be exposed to an act of family and domestic violence

Applicant (Person Lodging this Application)

Are you the person seeking to be protected the parent or guardian of a child who is to be protected
 a Police Officer the legal guardian of the person who is to be protected
 A Child Welfare Officer on behalf of a "child" seeking to be protected.

Only complete the following details if you are NOT the person to be protected

Family Name	Other Names	
Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Home Address		
Street		
Suburb	Home Phone:	
Postcode	Work Phone:	
	Mobile:	

Only complete the following if you are a Police Officer

Name:	Work Phone	
Signature:	Reg No:	Police Station: