

## **ADDITIONAL INFORMATION FOR FILING AN EX-PARTE PETITION**

- **There is no filing fee required.**
- **An ex-parte is for your PHYSICAL protection only. It is not meant for the protection of property. (PLEASE READ THE ATTACHED “DEFINITIONS OF ABUSE” AS LISTED ON THE MAIN INSTRUCTION PAGE).**
- **You must give DETAILED ACCOUNTS of the abuse/assault actions that have occurred. In addition, we do not have access to police reports, so you must provide one if you would like it attached to your petition.**
- **You MUST provide a physical address where the Respondent may be served, in the event your ex-parte is granted or a hearing is scheduled.**
- **Only a parent or legal guardian may file a Child Protection petition. The parent/legal guardian and feel a child is in danger, call your local law enforcement agency and/or the Child Abuse and Neglect Hotline (800)392-3728.**

## **EX-PARTE FILING PACKET CHILD PROTECTION**

### **Child Protection Petition**

- \* Answer all questions to the best of your ability
- \* On the signature page, you must check the Redaction check box

### **Confidential filing Information Sheet**

- \* You are the Petitioner (PET)
- \* Person you are filing against is the Respondent (RES)
- \* You must provide a good address for orders to be served
- \* Page 2 is for children's information
- \* Please provide birthdates & complete Social Security #s if available

### **Definition of Abuse**

You are notified that under section 455.010 (1) RSMo "Abuse" includes but is not limited to the occurrence of any of the following acts, attempts or threats against a person who may be protected pursuant to this chapter, except abuse shall not include abuse inflicted on a child by accidental means by an adult household member or discipline of a child, including spanking, in a reasonable manner.

- (1) "Assault" purposely or knowingly placing or attempting to place another in fear of physical harm
- (2) "Battery" purposely or knowingly causing physical harm to another with or without a deadly weapon
- (3) "Coercion" compelling another by force or threat of force to engage in conduct from which the latter has a right to abstain or to abstain from conduct in which the person has a right to engage
- (4) "Harassment" engaging in a purposeful or knowing course of conduct involving more than one incident that alarms or causes distress to an adult or child & serves no legitimate purpose. The course of conduct must be such as would cause a reasonable adult or child to suffer substantial emotional distress and must actually cause substantial emotional distress to the petitioner or child. Such conduct might include, but is not limited to:
  - (a) Following another about in a public place or places
  - (b) Peering in the window or lingering outside the residence of another, but does not include constitutionally protected activity
- (5) "Sexual Assault" causing or attempting to cause another to engage involuntarily in any sexual act by force, threat of force, duress, or without that person's consent
- (6) "Unlawful Imprisonment" holding, confining, detaining or abducting another person against that person's will

### **Definition of Stalking**

You are notified that, under section 455.501(14) RSMo "Stalking" is when any person purposely engages in an unwanted course of conduct that causes alarm to another person, or a person who resides together in the same household with the person seeking the order of protection when it is reasonable in that person's situation to have been alarmed by the conduct. As used in this subdivision.

- (a) "Alarm" means to cause fear of danger of physical harm.

February 2, 2024



# Petition for a Court Order of Protection - Child

\_\_\_\_\_ County, Missouri Circuit Court  
(County where court is located. City of Saint Louis is considered a county.)

Use this form to ask for a court Order of Protection on behalf of a child (person under 17 years of age unless otherwise emancipated) who has been a victim of child abuse, sexual assault, or stalking. The Petitioner must be a parent, guardian, guardian ad litem, a court appointed special advocate, or a juvenile officer. Learn more: <https://www.courts.mo.gov/page.jsp?id=383>. This form is for use for one child. **Do not include the name of the child on this form. Include the name on the Confidential Redacted Filing Information Sheet.**

Case Number \_\_\_\_\_  
(Will be assigned by the court when case is filed)

\_\_\_\_\_  
(Your Name)  
Petitioner,

You are the **Petitioner**. The Petitioner is the person who starts a court case.

- I am the
- parent or guardian of the child.
  - guardian ad litem for the child.
  - court appointed special advocate for the child.
  - juvenile officer.

### Child needing protection:

**Protected Child Initials Only:** \_\_\_\_\_

Age: \_\_\_\_\_ Sex:  F  M Race: \_\_\_\_\_

And

\_\_\_\_\_  
Respondent.

The **Respondent** is the person the child needs protection from.

## A. Information about the people involved in this case

### Information about the protected child.



The person the child needs protection from will get a copy of this form.

#### Child

Relationship to Respondent:

- child  
 step-child or former step-child  
 parent is unmarried, intimate residing/resided with Respondent  
 other (specify): \_\_\_\_\_

#### Respondent is

- a household member who is residing with the child.  
 a household member who resided with the child in the past.  
 an emancipated child who is residing with the child.  
 an emancipated child who resided with the child in the past.  
 stalking the child.  
 sexually assaulting the child.

This happened at \_\_\_\_\_ (address),  
\_\_\_\_\_ (city), Missouri, in the County of \_\_\_\_\_.

The family home of the child is: (check the boxes that apply)

- owned     leased     rented

By:     Respondent     Petitioner     Other (name) \_\_\_\_\_.

Occupied by: (include name only if different from above) \_\_\_\_\_.

Respondent has knowingly and intentionally: (check all the boxes that apply)

- caused or attempted to cause physical harm to the child  
 placed or attempted to place the child in apprehension of immediate physical harm  
 coerced the child  
 stalked the child  
 harassed the child  
 sexually assaulted the child  
 unlawfully imprisoned the child  
 followed the child from place to place  
 abused the child's pet(s)  
 threatened to do any of the above

Please describe in detail what happened:

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An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because (describe): \_\_\_\_\_  
\_\_\_\_\_.

### Information about the person the child needs protection from.

The court and law enforcement will use this section to try to find the Respondent. Fill in as much information as you can.

**If you don't know something, leave it blank.**

Alias or nickname (list all): \_\_\_\_\_

Last four digits of social security number: \_\_\_\_\_ Age: \_\_\_\_\_

Is  at least 18 years of age or emancipated  under 18.

Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Identifying marks (Examples: tattoos, birthmark, braces, beard, pierced ear, glasses): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Phone number: \_\_\_\_\_

Work name: \_\_\_\_\_

Work address: \_\_\_\_\_

Work phone: \_\_\_\_\_ Work hours: \_\_\_\_\_

Other places law enforcement may find Respondent to serve the paperwork:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## B. I am asking the court to

Use this section to ask the court for what you want in the case. Check all boxes that apply.

1.  **Order an Ex Parte (emergency) Order of Protection.**

**Ex parte** means this request can be granted without a hearing. It is a temporary order.

2.  **Order a Full Order of Protection.**

The court will schedule a hearing about your request and may grant the order after listening to both sides.

3. I want the court to order Respondent not to:

- commit or threaten to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected child.
- abuse or threaten to abuse the protected child's pet(s).
- enter the family home of the protected child, located at \_\_\_\_\_
- enter the school(s) of the protected child, located at \_\_\_\_\_
- enter the place of work of the child, located at \_\_\_\_\_
- come within \_\_\_\_\_ (feet) of the protected child.
- communicate with the protected child by phone, email, text, social media, or in any other way.
- have any contact with the protected child except as specifically authorized by the court order.
- other: \_\_\_\_\_
- I am requesting the Ex Parte Order of Protection exclude Respondent from the family home of the protected child because:
  - It is in the best interest of the child to remain in the home;
  - A substantial risk to the child exists unless Respondent is excluded.
  - A remaining adult family or household member is able to care adequately for the child in the absence of Respondent; and
  - A commitment has been obtained from the Children's Division to provide appropriate social services to the family or household members during the period of time which an Order of Protection is in effect
- I am not requesting exclusion of Respondent from the family home of the protected child.

4.  **Award custody or visitation of the protected child as listed in D. below.**

5. **Order Respondent to pay child support, maintenance, other support, court fees, or for injuries I received.**

**Child support** is money paid by one parent to the other parent or guardian for the financial support of a child. Child support may be ordered by a court or child support enforcement agency.

**Maintenance** is money paid by one ex-spouse to the other ex-spouse for financial support of the spouse. Maintenance may be ordered by a court during or after a divorce.

- I ask Respondent to pay \$ \_\_\_\_\_ in **child support** to me every  week  month.
- I ask Respondent to pay \$ \_\_\_\_\_ in **maintenance** to me every  week  month.
- I ask Respondent to pay \$ \_\_\_\_\_ to me for **rent or mortgage payments to the residence occupied by the protected child**  per week  per month on the home that I live in.
- I ask Respondent to pay \$ \_\_\_\_\_ to me for **reasonable housing or other services provided to the protected child by a shelter for victims of domestic violence**  per week  per month.

- I ask Respondent to pay \$ \_\_\_\_\_ to me for **medical treatment or services provided to the protected child as a result of injuries sustained by an act of domestic violence committed by Respondent.**
- I ask Respondent to pay **court costs.**
- I ask Respondent to pay **attorney fees.**

6. **Order temporary possession of personal property to me.**

**Personal property** is property other than land that you own. Examples of personal property are a bed, furniture, Xbox, jewelry, etc.

- Order Petitioner be given temporary possession of (list items)

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- Prohibit Respondent from disposing of property owned together with me

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7.  **Order the Respondent to go to counseling or treatment for**

- batterers.
- substance abuse.

8. **Other**

- Order the full order of protection to automatically renew unless Respondent asks for a hearing at least 30 days before the order expires.
- Petitioner to receive wireless telephone number(s) and billing responsibilities from Respondent. You must also complete the Wireless Telephone Number Transfer Addendum form. <https://www.courts.mo.gov/file.jsp?id=105013>
- Award possession and care of the child's pet(s) to me and order Respondent to pay for medical costs that resulted from abuse of the pet(s).
- Order my address on my voter's registration record to be closed to the public.
- Other (specify): \_\_\_\_\_.

## C. Custody of the Child



The court cannot change custody if a prior order regarding custody is pending or has been made.

Who should receive custody of the child?

<u>Person to Receive Custody</u>	<u>Relationship to Parties</u>	<u>Temporary</u>	<u>Full</u>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Indicate any prior or pending court cases before, or orders entered by this court or any other court involving the following parties. (If there are no cases, indicate there are none.)

Petitioner: \_\_\_\_\_

Respondent: \_\_\_\_\_

Child (identified above): \_\_\_\_\_

Award visitation with the child as follows: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## D. Signatures

I swear or affirm under penalty of perjury that the facts are true according to my best knowledge and belief.

I certify that I have removed all confidential information from this document in compliance with the redaction requirements in Rule 55.025.



**NOTICE:** You are not required to reveal any current address or place of residence of the child on this petition. **Do not provide this information if doing so will endanger the child.**

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Date

\_\_\_\_\_  
Your address, telephone number

\_\_\_\_\_  
Attorney Signature (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's name, bar number

\_\_\_\_\_  
Attorney's address, telephone number



**Order of Protection – Child  
Petitioner and Protected Child Information  
Confidential Record**

**DO NOT SERVE WITH PETITION - COURT USE ONLY**



**Disclosure of the protected child's or my current address or place of residence may endanger the child. This information must be maintained as Confidential and is for Court Use Only.**

Protected Child's Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Petitioner's Permanent Address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Petitioner's Temporary and/or Mailing Address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

**Order of Protection – Child  
Petitioner and Protected Child Information  
Confidential Record**

**DO NOT SERVE WITH PETITION - COURT USE ONLY**



**Disclosure of the protected child's or my current address or place of residence may endanger the child. This information must be maintained as Confidential and is for Court Use Only.**

Protected Child's Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Petitioner's Permanent Address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Petitioner's Temporary and/or Mailing Address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

**CONFIDENTIAL CASE FILING INFORMATION SHEET  
DOMESTIC RELATIONS CASES – ADULT ABUSE/STALKING  
Required at Case Initiation**

**NOTICE TO LAW ENFORCEMENT:** This is a confidential form and shall be used only to validate the electronic transfer of the case into the Missouri Uniform Law Enforcement System (MULES).

**DO NOT SERVE THIS FORM TO THE RESPONDENT.**

**INSTRUCTIONS:**

- ✓ Complete this form for all parties known at the time of filing. Provide the most appropriate Case Type and Party Type codes and descriptions. (Found on the Case Types List and Party Types List at [www.courts.mo.gov](http://www.courts.mo.gov) on the Court Forms/Filing Information page.)
- ✓ If additional space is needed, complete additional Confidential Case Filing Information Sheets.

**NOTE:** The **full** Social Security Number (SSN) is **required** pursuant to Court Operating Rule 4.07 if the party is a person and is reasonably available. This is a confidential document. This information is needed to open a case in the court's case management system. While cases deemed public under Missouri statutes can be accessed through Case.net, the day and month of birth, SSN, and confidential addresses are NOT provided to the public through Case.net.

Filing Date: \_\_\_\_\_ County/City of St. Louis: RAY COUNTY, MISSOURI

Style of Case: \_\_\_\_\_  
(i.e. Petitioner v. Respondent)

Case Type Code: \_\_\_\_\_ Case Type Description: \_\_\_\_\_

**Petitioner/Protected Person Information:**

Party Type Code: **PET** Party Type Description: **Petitioner**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact Telephone Number: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Race: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_

**Respondent Information:**

Party Type Code: **RES** Party Type Description: **Respondent**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact Telephone Number: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Race: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_

**Employer Information**

Petitioner/Protected Person Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact Telephone Number: \_\_\_\_\_

Respondent Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact Telephone Number: \_\_\_\_\_

The following information regarding children is required. Complete this section for any child subject to the action of this case.

\*MACSS – Missouri Automated Child Support System

**Children:**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Check if more than five children and attach additional sheet

Submitted by: \_\_\_\_\_ Bar ID (required if attorney): \_\_\_\_\_

Address (if not shown on previous page): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

\*IMPORTANT: It is the parties' responsibility to keep the court informed of any change of address or employment.\*

**Instructions to Clerk**

**This copy of this form shall be sent to law enforcement to validate the electronic transfer of the case into MULES.**

**Maintain the closed portion(s) of the record in a sealed manila envelope within the file. The file can be maintained with other open records. If a request is made to review the open portion of the file, the envelope can be removed from the file. Access to the record must be restricted to avoid access to the closed portion of the record.**