

**MINNESOTA CHIPPEWA TRIBE
BOIS FORTE BAND OF CHIPPEWA
BOIS FORTE TRIBAL COURT**

**PETITIONER'S AFFIDAVIT AND
PETITON FOR HARASSMENT
RESTRAINING ORDER**

Petitioner Name and Address

Respondent Name and Address

vs.

The undersigned Petitioner, being sworn on oath, states that:

1. Petitioner Information.

I am the Petitioner in this action. I am requesting that the Bois Forte Tribal Court issue a Harassment Restraining Order against the Respondent because I, and/or my minor children or a person for whom I am the legal guardian, am/is a victim of harassment.

Petitioner Name: _____

Petitioner Date of Birth: _____

Petitioner Gender: Male Female

Petitioner Address:

I am requesting that my address be kept confidential, and I am submitting a completed *Confidential Address/Phone Request* form with this Petition.

OR

I am not requesting that my address be kept confidential. My address is:

Street: _____

City, State, Zip Code: _____

Petitioner Telephone Number(s):

I am requesting that my telephone number(s) be kept confidential, and I am submitting a completed *Confidential Address/Phone Request* form with this Petition.

OR

I am not requesting that my telephone number(s) be kept confidential. My telephone number(s) is/are:

Home phone: _____

Cell phone: _____

2. Who Needs Protection?

The following individuals are victims of harassment:

- Me (Petitioner)
- My minor children
- A person for whom I am the legal guardian (attach Guardianship Order)

For anyone you checked above, other than yourself, please fill out the following: None

Name (first, middle, last)	Gender	Date of Birth	Lives with you?
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Respondent Information.

Respondent Name: _____

Respondent Date of Birth (if unknown, age or approximate age): _____

Respondent Gender: Male Female

Respondent Address:

Street: _____

City, State, Zip Code: _____

Respondent Telephone Number(s):

Home Phone: _____

Cell Phone: _____

Is Respondent under the age of 18? Yes (Answer questions below) No

*If Respondent is under 18 years old, service will be made on Respondent **and** Respondent's parent or guardian.*

Respondent's Parent/Guardian Name: _____

Parent/Guardian Address: _____

What are the relationship(s) between Respondent and the people who need protection?
(check all that apply)

- Married
- Divorced
- Currently living together
- Lived together in past
- Have a child together
- Have an unborn child together
- Parent/child
- Other/None of the above. Describe relationship: _____

4. Acts of Harassment.

Pursuant to the Bois Forte Tribal Code, "harassment" means repeated, intrusive, or unwanted acts, words, gestures, or other communications that are intended to adversely affect the safety, security, or privacy of another, regardless of the relationship between the actor and the victim. *See Bois Forte Tribal Code, Section 608.01.*

Describe the harassing act(s) that the Respondent is or has committed against the victim(s). **For each harassing act, please include the date or date range of the incident.** Check all that apply.

Respondent has made uninvited visits to the victim as follows: _____

Respondent has made harassing phone calls and/or messages to the victim as follows: _____

Respondent has followed, monitored, or pursued the victim as follows: _____

Respondent has made threats to or frightened the victim as follows: _____

Respondent has displayed assaultive behavior to the victim as follows: _____

Respondent has called the victim abusive names as follows: _____

Respondent has damaged victim's property as follows: _____

Respondent has broken into and entered the victim's residence as follows: _____

Respondent has stolen property from the victim as follows: _____

Respondent has taken pictures of the victim without permission as follows: _____

Respondent has used social media to harass the victim as follows: _____

Other: _____

How has the harassment affected the victim's safety, security, or privacy? _____

Do you believe the harassment will continue? Yes (Describe why below) No

5. Request for Relief.

Based on this Affidavit and Petition, I request the following relief: (Check all that apply)

- I request that the Court issue an *Ex Parte* Temporary Restraining Order (“TRO”).

I understand that a TRO is a temporary order that is issued prior to the Respondent being served this Petition and prior to the Court holding a hearing.

I understand that the Court may grant a TRO if, based on the information I have provided in this Petition, the Court finds that there is an *immediate and present danger of harassment*.

I understand that a TRO is temporary and will be valid only until a hearing is held, at which time the parties will present evidence to the Court and the Court will decide whether or not to grant a Harassment Restraining Order.

I understand that if the Court does not find there is an immediate and present danger of harassment and does not grant a TRO, then I will still be required to appear at the hearing in order to further request the Court to grant a Harassment Restraining Order.

- I request that the Court order the Respondent not to harass Petitioner and/or Petitioner’s minor child(ren) or ward(s).
- I request that the Court order the Respondent to have no contact with Petitioner and/or Petitioner’s minor child(ren) or ward(s).
- I request that the Court issue a Harassment Restraining Order at the hearing

Date: _____

Signature of Petitioner
(Sign only in front of Notary Public)

Subscribed and sworn to before me this
_____ day of _____

Notary Public