

Information for an application for a FAMILY VIOLENCE RESTRAINING ORDER *or* VIOLENCE RESTRAINING ORDER

Please provide as many details as you can, to help the police to serve any order that may be made

NATURE OF RELATIONSHIP

What is the relationship between the person seeking to be protected and the respondent?	<input type="checkbox"/> Family Relationship (Family Violence Restraining Order)	A family relationship means a relationship between 2 people who are, or were, married, de facto partners, related to each other (including by culture or kinship) or otherwise in an intimate or family-type relationship.																					
	I am seeking a restraining order against my:	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Husband</td> <td><input type="checkbox"/> Mother</td> <td><input type="checkbox"/> Aunt</td> </tr> <tr> <td><input type="checkbox"/> Wife</td> <td><input type="checkbox"/> Father</td> <td><input type="checkbox"/> Uncle</td> </tr> <tr> <td><input type="checkbox"/> De facto partner</td> <td><input type="checkbox"/> Son</td> <td><input type="checkbox"/> In-law</td> </tr> <tr> <td><input type="checkbox"/> Boyfriend</td> <td><input type="checkbox"/> Daughter</td> <td><input type="checkbox"/> Carer</td> </tr> <tr> <td><input type="checkbox"/> Girlfriend</td> <td><input type="checkbox"/> Sibling</td> <td><input type="checkbox"/> Child that lives with me</td> </tr> <tr> <td><input type="checkbox"/> Ex-Partner</td> <td><input type="checkbox"/> Step-relative</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Partner's Ex-Partner</td> <td><input type="checkbox"/> Ex-Partner's Partner</td> <td></td> </tr> </table>	<input type="checkbox"/> Husband	<input type="checkbox"/> Mother	<input type="checkbox"/> Aunt	<input type="checkbox"/> Wife	<input type="checkbox"/> Father	<input type="checkbox"/> Uncle	<input type="checkbox"/> De facto partner	<input type="checkbox"/> Son	<input type="checkbox"/> In-law	<input type="checkbox"/> Boyfriend	<input type="checkbox"/> Daughter	<input type="checkbox"/> Carer	<input type="checkbox"/> Girlfriend	<input type="checkbox"/> Sibling	<input type="checkbox"/> Child that lives with me	<input type="checkbox"/> Ex-Partner	<input type="checkbox"/> Step-relative		<input type="checkbox"/> Partner's Ex-Partner	<input type="checkbox"/> Ex-Partner's Partner	
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Other																							
<input type="checkbox"/> Non-Family Relationship (Violence Restraining Order)	A non-family relationship means any relationship which is not a family relationship (as described above)																						
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PERSON SEEKING TO BE PROTECTED

Family Name		Given Names	
Date of Birth		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Home Address			
Street			
Suburb		Postcode	
Preferred Postal Address (if different from home address)			
Street			
Suburb		Postcode	
Is the Respondent aware of your home address? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Phone Numbers			
Home		Work	
		Mobile	
<i>Person Seeking to be Protected Ethnicity</i>			
<input type="checkbox"/> Aboriginal Australian	<input type="checkbox"/> British	<input type="checkbox"/> Italian	<input type="checkbox"/> Filipino
<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Chinese	<input type="checkbox"/> Maori	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Non-Aboriginal Australian	<input type="checkbox"/> Indian	<input type="checkbox"/> New Zealander	<input type="checkbox"/> Yugoslav
<input type="checkbox"/> Arabic	<input type="checkbox"/> Indonesian	<input type="checkbox"/> Somali	<input type="checkbox"/> South African
<input type="checkbox"/> Sudanese	<input type="checkbox"/> Other (Please Specify)		

PERSON YOU ARE SEEKING THE RESTRAINING ORDER AGAINST (‘RESPONDENT’)

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 Ethnicity</i>			
<input type="checkbox"/> Aboriginal Australian	<input type="checkbox"/> British	<input type="checkbox"/> Italian	<input type="checkbox"/> Filipino
<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Chinese	<input type="checkbox"/> Maori	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Non-Aboriginal Australian	<input type="checkbox"/> Indian	<input type="checkbox"/> New Zealander	<input type="checkbox"/> Yugoslav
<input type="checkbox"/> Arabic	<input type="checkbox"/> Indonesian	<input type="checkbox"/> Somali	<input type="checkbox"/> South African
<input type="checkbox"/> Sudanese	<input type="checkbox"/> Other (Please Specify)		

PERSON LODGING THIS APPLICATION (‘APPLICANT’)

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

STOP: Only complete this section if you are applying on behalf of someone else

Family Name		Other Names	
Date of Birth	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Preferred Postal Address Street			
Suburb		Postcode	
Phone Numbers			
Home	Work	Mobile	
<i>Applicant Ethnicity</i>			
<input type="checkbox"/> Aboriginal Australian	<input type="checkbox"/> British	<input type="checkbox"/> Italian	<input type="checkbox"/> Filipino
<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Chinese	<input type="checkbox"/> Maori	<input type="checkbox"/> Vietnamese
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<input type="checkbox"/> Sudanese	<input type="checkbox"/> Other (Please Specify)		

STOP: Only complete this section if you are a Police Officer

Name	Work Phone	
Signature	Reg No	Police Station

Grounds for making this application

Why do you need a restraining order? To prevent the respondent from: (Tick the appropriate box or boxes)	<input type="checkbox"/>	committing personal violence or family violence
	<input type="checkbox"/>	behaving in a way that makes you believe that personal violence or family violence <u>will be</u> committed
	<input type="checkbox"/>	exposing a child to family violence; or
	<input type="checkbox"/>	behaving in a way that makes you believe that a child <u>will be</u> exposed to family violence

Application Details

Please briefly summarise the Respondent's behaviour: [Use the HELP SHEET] but ONLY write in the space provided here

Are there any current family orders relating to the respondent's rights in relation to children who may be affected by a restraining order? [If yes, please attach copies of these orders]	<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 firearms licence?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Does the respondent have access to a firearm – either at work or otherwise?	<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

If you would like the restraining order extended to protect other people (e.g. children in your care), please provide their details below:

Name:	Date of Birth:	Relationship to person seeking protection:

Have any incidents been reported to Western Australia Police? Please list the Incident Report number(s) if you have them

Do any other restraining orders exist (including local (WA), national or international court orders or police orders) between the person seeking protection and the respondent? Yes No

If yes, please provide details (e.g. State/Territory in which order made, order number)

COURT STAFF: If other orders exist, please email completed application to WA.FamilyViolence@justice.wa.gov.au

HELP SHEET

What is family violence?

Family violence means:

- **violence** or a threat of violence; or
- any other behaviour that **coerces or controls** you, or makes you **fearful**.

These are **some** examples but there may be others:

Assault	E.g. Hitting, punching, pushing, pulling, kicking, choking, or threat to do this
Sexual Assault	E.g. Pressuring you into sexual acts, rape, other indecent assault, or threats to do this
Stalking or cyber-stalking	E.g. Following you to intimidate you or using electronic means to monitor your movements or communications, repeatedly communicate with or harass you
Repeated derogatory remarks	E.g. Verbal abuse, calling you names, putting you down, saying you are worthless, saying things that humiliate, shame or degrade you
Damaging or destroying property	E.g. Breaking or damaging property (that you own, have custody of, use or enjoy, either in the place where you live or work)
Killing or injuring an animal	E.g. Pets or other animals in your care
Economic abuse	E.g. Unreasonably denying financial autonomy (e.g. unreasonably controlling your access to money, not letting you work, forcing you to pay money to others against your will, forcing you to take on debts) E.g. Unreasonably denying necessary financial support in circumstances of financial dependency (e.g. withholding money needed to look after yourself or children)
Preventing you from making or keeping connections with your family, friends or culture	E.g. Isolating you or cutting you off from your friends or family
Kidnapping or deprivation of liberty	E.g. Keeping you inside or in a place against your will
Distributing or publishing intimate personal images	E.g. Posting or threatening to post nude photos or videos on Facebook or Instagram, or emailing them to someone
Exposing a child to family violence	E.g. Causing a child to see, hear or otherwise experience the effects of family violence, such as overhearing threats of death or personal injury; seeing or hearing an assault; comforting or providing help to a person who has been assaulted; cleaning up a site after property damage; being present when police or ambulance officers attend an incident involving family violence
Other coercing, controlling behaviour	E.g. Intimidating, bullying, controlling where you go, what you wear or eat, when you sleep, who you can see, forcing you to do things you don't want to do

What is a family relationship?

A 'family relationship' means a relationship between 2 people:

- who are – or were – **married** to each other;
- who are – or were – in a **de facto** relationship with each other;
- who have – or had – an **intimate** personal relationship or other personal relationship with each other;
- who are – or were – **related** to each other (including by culture e.g. Aboriginal kinship relationships);
- one of whom is a **child** who normally lives or stays with the other person;
- one of whom is – or was – a child of whom the other person is a **guardian**.

Please note – If you are seeking protection from someone with whom you are not in a family relationship (e.g. a colleague, neighbour or friend), you will need to apply for a violence restraining order (VRO).

What happens next?

1. Take your completed application form to the Front Counter
2. They will tell you when you need to come to Court
3. If the Court decides to grant you a restraining order, think about what conditions you want. E.g. *"I do not want the Respondent to come near my house or my work"; "I do not want the Respondent to contact me except about the kids..."* etc.

ARE YOU SAFE? If you are in danger, call 000 or contact the Family Violence Service