

**FILED**

PUEBLO OF POJOAQUE TRIBAL COURT

DATE: \_\_\_/\_\_\_/\_\_\_ TIME: \_\_\_\_\_

**IN THE TRIBAL COURT  
PUEBLO OF POJOAQUE  
STATE OF NEW MEXICO**

\_\_\_\_\_  
COURT CLERK

\_\_\_\_\_, DOB: \_\_\_\_\_  
Petitioner, (Protected Party),

Case No. \_\_\_\_\_

And on behalf of minor family members:

\_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

v.

\_\_\_\_\_,  
Respondent (Restrained Party)

**PETITION FOR ORDER OF PROTECTION FROM DOMESTIC ABUSE**

I, \_\_\_\_\_, petition the Pojoaque Pueblo Tribal Court for an Order of Protection  on my behalf  on behalf of the minor child(ren) as the  parent  guardian  custodial representative against the Respondent \_\_\_\_\_, under the Pueblo of Pojoaque Law and Order Code (PPLOC §M-60) submit the following in support of my Petition:

The Respondent is (check all that apply):

- a current or former spouse or domestic partner;
- a person who is involved with or has been involved with me in a sexual or otherwise intimate, ongoing dating relationship, this includes persons who are identified in the community as boyfriend and girlfriend regardless of age or sexual orientation; or
- a family or household member who is  a spouse or former spouse  a person related by blood  a person related by an existing or prior marriage  a person with whom I have a child in common with regardless of whether we have lived together at any time.

**DOMESTIC ABUSE:** *Domestic Abuse includes: physical harm, severe emotional distress, bodily injury or assault, a threat causing imminent fear of bodily injury by a household member, criminal trespass, criminal damage to property, repeatedly driving by a residence or workplace, telephone harassment, stalking, harassment, harm or threatened harm to child(ren), sexual assault, unreasonable intimidation, exploitation, the willful deprivation by a caretaker of the basic necessities of life such as but not limited to food, shelter, clothing, and medical and personal care, which are necessary to avoid physical harm, mental anguish, or mental illness, or any other type of maltreatment.*

The Respondent committed the most recent act(s) of **domestic abuse** against me or a member of my family or household; *(describe in detail what took place, dates, times and locations. Please add more information on a separate piece of paper if there is not enough space below.)*

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If the Respondent has made threats which caused you or any household member to fear that you would be injured or harmed, describe the threats in detail, ex., what was exactly said, what was done, when were the threats made and to whom were the threats made, etc.

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Others present during the domestic abuse (who witnessed the activity, incident, occurrence?):

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Did drugs or alcohol play a role in the domestic abuse?  YES (If yes, describe below)  NO

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Were any types of weapon(s) used during the abuse?  YES (If yes, describe the weapons and how they were used below)  NO

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Have there been any prior acts of domestic abuse by the Respondent, whether reported to law enforcement or not?  YES (If Yes, describe in detail what took place, dates and locations.)  NO

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### **CHILDREN**

List all minor children of either party.

No Children

CHILD'S NAME	DATE OF BIRTH	RELATION TO YOU	RELATION TO RESPONDENT
1.			
2.			
3.			
4.			

List the address and with whom the child(ren) are currently residing. List each child separately if child(ren) do not reside with same person.

NAME	RESIDES WITH	ADDRESS (Do not list address if info is confidential for safety purposes)
1.		
2.		

3.	
4.	

List each child(ren) separately if they do not reside with either Petitioner or Respondent. Does anyone else have physical custody of the child(ren) or claim to have legal custody or visitation rights?

YES  NO If yes, complete the following for the child(ren)

CHILD'S NAME	PERSON CLAIMING RIGHTS OR CUSTODY
1.	
2.	
3.	
4.	

Respondent **HAS** abused the above child(ren) (*Describe any child abuse*):

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Respondent **HAS NOT** abused the above child(ren).

**OTHER COURT CASES**

List divorce, separation, order of protection, child support, paternity, abuse or neglect cases that have been filed by me, the Respondent or the Tribe/State, include active, inactive or closed cases:

TYPE OF CASE	YEAR FILED	CASE NUMBER	JURISDICTION CITY/STATE
1.			
2.			
3.			
4.			

I am:  an enrolled member of the Pueblo of Nambe;  an enrolled member of the \_\_\_\_\_ Pueblo/Tribe residing within the jurisdiction of the Pueblo of Pojoaque;  a non-member residing within the jurisdiction of the Pueblo of Pojoaque, New Mexico

**REQUESTED RELIEF:**

**I HEREBY PETITION THE COURT TO GRANT AND ORDER THE FOLLOWING (check all that apply):**

An Ex Parte Order for Protection from Domestic Abuse, due to the serious nature of the abuse and immediate threat of harm or injury by Respondent.

The Respondent not contact me at any time or in any manner or form of communication, not harm, abuse, harass, stalk, intimidate or threaten me; and that the Respondent stay away from my residence, place of employment, and/or school, and stay at least 100 yards away from me in any public places.

Prohibit the Respondent from threatening to commit or committing acts of domestic abuse/violence against me or against: \_\_\_\_\_

Prohibit the Respondent from harassing, intimidating, stalking, telephoning, texting, writing, e-mailing, contacting or otherwise communicating with me and the minor child(ren) directly or indirectly, through family members, relations by marriage, friends and co-workers;

Prohibit the Respondent from using or possessing a firearm or other weapon (specify weapon) \_\_\_\_\_;

Prohibit the Respondent from possession or consumption of alcohol or controlled substances;

Require the Respondent to participate in alcohol and other substance abuse assessments and to participate in substance abuse treatment programs available through \_\_\_\_\_;

Require the Respondent to undergo a psychological evaluation and to comply with any resulting recommendation for counseling;

I remain in the home/residence and the Respondent immediately leave my/our residence located at: \_\_\_\_\_

Direct an Pojoaque law enforcement officer to remove and exclude Respondent from my residence at: \_\_\_\_\_

Require the Respondent to remove his/her essential personal belongings from my residence, and direct a Pojoaque law enforcement officer to supervise the Respondent's removal of personal belongings from my residence. *Specify or list personal belongings:* \_\_\_\_\_

\_\_\_\_\_

Require the Respondent to timely pay any existing debts including mortgage or rental payments necessary to maintain the Petitioner in his/her residence;

Direct a Pojoaque law enforcement officer tribal law to accompany me to assist in retrieving my clothing and personal belongings, including child(ren)'s belongings if any, from the residence at:  
\_\_\_\_\_;

If Respondent owns or leases the residence, grant me the temporary use and possession of the Respondent's residence and Order the Respondent to avoid the residence located at:  
\_\_\_\_\_ for *Specify time period*: \_\_\_\_\_ (a reasonable and temporary length of time) until I am able to relocate to a different residence;

Prohibit Respondent from transferring, encumbering, selling, removing, pawning, concealing, destroying, damaging or disposing any of my or our property except as authorized by the Court and require the Respondent to provide an accounting to the Court for all such transfers, encumbrances, dispositions and expenditures;

Exclude Respondent from other specified locations frequented by me, including school, place of employment and other places at any time I am present, specifically (*building or location*): \_\_\_\_\_.

Exclude Respondent from specified public social events and activities, which are as follows: \_\_\_\_\_;  
\_\_\_\_\_;  
Including any type of contact during tribal ceremonies, gatherings, or other like type activities.

That I be given temporary custody of the child(ren) as indicated herein: (if a custody determination is not requested do not check this box)

- Physical custody with visitation as follows:
  - Supervised by Pojoaque Pueblo Domestic Violence Program;
  - Other supervision \_\_\_\_\_;

Both legal and physical custody, with no visitation of the child(ren) until determined at hearing.

That I be given  temporary guardianship of: \_\_\_\_\_ who is a decisionally incapacitated adult or  temporary care of \_\_\_\_\_ who is a disabled victim of domestic violence;

Respondent pay:  Temporary Child Support \$\_\_\_\_\_. \_\_\_\_ per month to the Petitioner  Temporary Spousal support \$\_\_\_\_\_. \_\_\_\_ per month to the Petitioner;

Require Respondent to participate in and complete counseling and domestic violence intervention classes provided by  Pojoaque Pueblo Healthy Families  ENIPC Peacekeepers DV Program.

Require Respondent to reimburse me or any other person for any expenses associated with the domestic or family violence, including but not limited to medical expenses, counseling, shelter, and repair or replacement of damaged property;

Any other relief as the Court deems necessary to protect and provide for the safety of the Petitioner and any designated family or household member, specifically: \_\_\_\_\_  
\_\_\_\_\_.

**RESPONDENT INFORMATION:**

Respondent is currently Incarcerated:  YES Where: \_\_\_\_\_  NO

**Respondent may be found at (This information must be provided for service of Petition to Respondent):**

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

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

Home Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

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

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

Employer Phone Number: \_\_\_\_\_

SEX	RACE	DOB	HEIGHT	WEIGHT
EYE COLOR	HAIR COLOR	SOCIAL SECURITY NO.	DRIVER'S LICENSE NO.	STATE/EXPIRATION DATE OF DL

Respondent has the following weapons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Respondent is:  an enrolled member of the Pueblo of Pojoaque;  an enrolled member of the \_\_\_\_\_ Pueblo/Tribe residing within the jurisdiction of the Pueblo of Pojoaque;  a non-member residing within the jurisdiction of the Pueblo of Pojoaque, New Mexico;  A non-member who resides at \_\_\_\_\_ (physical location).

WHEREFORE, Petitioner(s) prays that the Pojoaque Pueblo Tribal Court grant the Petition for Order of protection as requested by the Petitioner for cause showing.

**RESPECTFULLY SUBMITTED:**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Print Name

- **PETITION FOR ORDER OF PROTECTION FILING FEE IS WAIVED.**



**CONFIDENTIAL – FOR COURT’S FILE & USE ONLY – THIS PAGE IS NOT TO BE INCLUDED WITH COPY OF PETITION THAT WILL BE SERVED ON THE RESPONDENT**

**PETITIONER’S CONTACT INFORMATION (Petitioner must provide this information):**

My physical address is: \_\_\_\_\_

My mailing address is: \_\_\_\_\_

My telephone numbers are: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email address: \_\_\_\_\_

**COURT ASSISTANCE REQUEST**

We will need an interpreter in to translate for Plaintiff  Respondent

We will need (describe special request for assistance) \_\_\_\_\_

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

No Assistance Needed

**Case File #** \_\_\_\_\_ **(To be filled out by Court)**

## **INSTRUCTIONS FOR FILLING OUT PETITION FOR ORDER OF PROTECTION**

1. Petitioner should complete all known information at the time of filing or verify with proof within a reasonable period of time or as instructed by the Court. Incomplete Petitions will delay processing of the Petition by the Court.
2. If the information that you are providing does not fit in the space provided on the form, please add more pages, number those pages, and initial the additional pages on the top right corner of the page.
3. Section of form regarding children: **If a child lives with you now, but you do not want respondent to know your address, do not put your current address on the Petition.**
4. Please call the Pojoaque Pueblo Tribal Court at: 505-455-2271 to notify Court that you are filing the Petition by email, mail, fax, or if you are delivering the Petition to the Court.
5. Petitioner has the option of contacting the following for assistance in filling out this Petition form and to obtain information on related available services:
  - a. Pueblo of Pojoaque Domestic Violence Program: 505-415-2474 (night and weekend)
  - b. Law Enforcement: dial 911 or Pojoaque Pueblo Dispatch **505-455-2295**.
  - c. BIA Law Enforcement: 505-753-1430 (M-F 8am to 5pm only)
  - d. Santa Fe County Sheriff Dispatch: 505-428-3720
  - e. Rio Arriba County Sheriff Dispatch: 505-753-3320
  - f. New Mexico State Police: 505-753-2277
  - g. Esperanza Shelter for Battered Families (Santa Fe): 505-473-5200 local hotline or 1-800-473-5220 toll free hotline or 505-473-5200 direct shelter line.
  - h. Espanola Crisis Center (Espanola): 1-800-206-1656 24hour crisis hotline or 505-753-1656 non-emergency line.
  - i. Eight Northern Indian Pueblos Council, Peacekeepers Program: 505-753-4790