



**JOHN W. MOORE  
CRIMINAL DISTRICT ATTORNEY  
GREGG COUNTY, TEXAS**

**FAMILY VIOLENCE  
PROTECTIVE ORDER INFORMATION**

Protective Orders exist to provide a civil legal remedy for victims of family violence, sexual assault, or stalking. The Gregg County Criminal District Attorney's Office assists those seeking protection through the issuance of a protective order.

**Not everyone qualifies for a protective order.** There are particular requirements that must be met and steps that must be taken for the District Attorney's Office to seek a protective order on your behalf.

- You or the abuser must **BE A RESIDENT OF GREGG COUNTY**.
- You must **NOT** have an open criminal file with the Gregg County Criminal District Attorney's Office. Having an open criminal file creates a potential conflict of interest for this office in seeking your protective order.



**YOU MUST NOT BE INVOLVED IN A DIVORCE OR ANY KIND OF SUIT AFFECTING THE PARENT-CHILD RELATIONSHIP WITH THE ABUSER.** If you are married and in need of a divorce, a protective order should be sought through your attorney. Additionally, if there are no existing custody order in place, you will need to seek a protective order through a family law attorney who can represent you in a custody dispute. **THE DA OFFICE CANNOT REPRESENT YOU IN A DIVORCE OR CUSTODY ISSUE.**

- For Family Violence, you must be able to show that Family Violence has occurred. This means that the abuser has caused **PHYSICAL** harm, aka bodily injury. Threats alone are not enough. A threat must reasonably place the victim in fear of imminent harm.
- You must be willing to complete the questionnaire and submit an affidavit regarding the circumstances surrounding your need for a protective order.
- **You must be able to attend a hearing before the court where the basis for your application will be presented to the judge.** The Respondent has the right to be present at the hearing and oppose the issuance of a Protective Order.
- You must be able to provide the District Attorney's Office with an address where the abuser can be reached. For a protective order to be pursued, the abuser must be served with notice of the hearing date.

## HOW TO USE THIS QUESTIONNAIRE

1. **USE BLUE OR BLACK INK ONLY. DO NOT USE PENCIL.**
2. Write legibly – printing or typing is preferred. Illegible applications will be asked to return to fill out a new form.
3. **Fill out the form completely.** You will not qualify for a protective order if you do not fully fill out the form.
4. Pay special attention to the information on Pages 3 and 4.

### **Return the completed questionnaire to the District Attorney's Office:**

**By fax: 903-236-8490**  
**By mail: Protective Orders Unit**  
**Gregg County Criminal District Attorney**  
**101 E. Methvin, Ste. 333**  
**Longview, Texas 75601**

\*\*\* This usually requires at least two stamps.

**In person: Between the hours of 8:30 a.m. to 5:00 p.m. (closed noon-1:00pm), Monday through Friday, at the office located in Suite 206 on the 2<sup>nd</sup> floor of the Gregg County Courthouse at the above address.**

VERY IMPORTANT: If you return the questionnaire by mail or by fax, please call the Protective Orders Unit at 903-236-8440 to make sure that it has been received. Your questionnaire will be reviewed by an attorney after it is received; this usually takes at least one working day. We are unable to call everyone who turns in a completed questionnaire.

# PROTECTIVE ORDER QUESTIONNAIRE

## GREGG COUNTY CRIMINAL DISTRICT ATTORNEY'S OFFICE

COMPLETING THIS QUESTIONNAIRE **DOES NOT** MEAN YOU WILL RECEIVE A PROTECTIVE ORDER OR THAT A JUDGE WILL GRANT YOU A PROTECTIVE ORDER. THIS QUESTIONNAIRE IS USED TO DETERMINE: 1) IF YOU QUALIFY FOR A PROTECTIVE ORDER AND 2) WHETHER THIS OFFICE CAN FILE AN APPLICATION FOR A PROTECTIVE ORDER ON YOUR BEHALF.

**You must go to court to get a protective order.** The District Attorney's Office uses this form to determine if we can represent you in a protective order proceeding. If the District Attorney's Office can represent you in a protective order proceeding, you will have to meet with an assistant district attorney. The information that you provide in this questionnaire is for the use of the Gregg County Criminal District Attorney's Office only and will be kept confidential unless we are required by law to release or report any information.

### PROTECTIVE ORDERS

A protective order is a civil court order that tells the person you are complaining against not to commit any further acts of violence against you. The District Attorney's Office does not issue protective orders. Only a district court judge can grant a protective order. What this office can do is prepare and file your application for a protective order and represent you in court.

**You must be willing to make a time commitment.** A protective order takes at least two weeks to obtain and requires at least one appointment in our office and at least one court appearance.

Before a judge will grant a protective order, it must be shown to the judge that family violence or dating violence has occurred and that family violence or dating violence is likely to occur in the future. **Family violence or dating violence** is defined as an act intended to result in physical harm, bodily injury, assault, or sexual assault or a threat that places you in reasonable fear of imminent physical harm, bodily injury, assault, or sexual assault.

Also it must be shown that you and the person you want the order against meet one of the following relationships: 1) have had a dating relationship; 2) have been married; 3) have recently lived together; 4) have had a child together; 5) have or had a dating relationship or marriage with the same individual.

You **must** provide an address where the person can be found during the day. To get a protective order the abuser **must** receive personal notification of your application for a protective order.

After the application for a protective order is prepared and filed by this office on your behalf, **you will have to appear in court**. If the judge grants the protective order on the day you appear in court, the person you are complaining against may be ordered **NOT** to:

1. Commit any acts of violence against you;
2. Communicate directly with you in a threatening or harassing manner;
3. Go within a specified distance of your home or place of employment;
4. Possess a firearm;
5. Remove or harm pets or companion animals.

**This office DOES NOT become involved with CUSTODY, VISITATION, CHILD SUPPORT matters or PROPERTY disputes. If you are married to the person, and you are currently going through a divorce, you should talk to your divorce attorney about getting a protective order as part of your divorce or if custody or property issues are important to you, you may want to consult a private attorney who can help you get custody of your children and possession of property in addition to obtaining a protective order.**

After the court hearing, if the judge grants the protective order, your local police or sheriff's department will be sent a copy of the order. If the person complained against violates the protective order **and the violation is reported to law enforcement**, criminal charges can be filed if there is sufficient proof of a violation. The maximum punishment that a violator can, but not necessarily will, receive is one (1) year in jail or a \$4000.00 fine or a combination of the two.

**IF YOU WISH TO OBTAIN A PROTECTIVE ORDER AND YOU MEET THE RELATIONSHIP REQUIREMENT AND FAMILY VIOLENCE HAS OCCURRED, PLEASE COMPLETE THE REST OF THIS PROTECTIVE ORDER QUESTIONNAIRE. OTHERWISE, PLEASE RETURN THIS FORM TO THE FRONT DESK.**

A protective order is **not** a criminal charge. Criminal acts and violations of a protective order must be reported to a law enforcement agency in order to be prosecuted. If you have suffered personal injury as a result of a criminal act, you may qualify for crime victims' compensation benefits. To be eligible for consideration, you must report the crime to law enforcement within a reasonable period of time, but not so late as to interfere with or hamper the investigation and prosecution of the crime. For more information you may contact the victim assistance liaison at the appropriate law enforcement agency. It is the policy of the District Attorney that all services and activities of the office are accessible to all qualified persons without regard to disability. If you have a disability that will require an accommodation, please call the Family Violence Unit at 903/237-2584 as far in advance as possible.

**IF THE PROTECTIVE ORDER IS GRANTED AND THE RESPONDENT VIOLATES THE ORDER, YOU MUST REPORT THE VIOLATION TO LOCAL LAW ENFORCEMENT.**

**SECTION I**

Today's date: \_\_\_\_\_

Your full name: \_\_\_\_\_

Other names you have used: \_\_\_\_\_

Sex: Male Female    Race: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_ Your age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Yes No Do you have any handicaps or disabilities?

If yes, what is the nature of your handicap or disability?

- Visual impairment                      Hearing impairment                      Mobility/functional impairment
- Emotional/mental disorders    Cardiac/circulatory diseases    Respiratory diseases
- Other physical handicap/disabling condition

Name of person you want a protective order against (Respondent): \_\_\_\_\_

How did you find out about this office?

- Law enforcement agency – which one \_\_\_\_\_
- Judge or justice of the peace    Mental health services    Medical services
- Social service agency - please specify: \_\_\_\_\_
- Other - please specify: \_\_\_\_\_

**SECTION II**

Your Home Address: \_\_\_\_\_

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

Home Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Safe E-mail Address \_\_\_\_\_

Yes No Is this address where you are currently living?                      If no, write your current address below.

Who lives at this address \_\_\_\_\_

Yes No Does the abuser know where you are staying now?

Yes No Does the abuser know where you live?

Yes No Do you live with any other adult(s) at this address?

Relative or friend (not living with you) who will always be able to locate you:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

City State Zip \_\_\_\_\_ Phone No. \_\_\_\_\_

**If you want mail sent somewhere other than your home address, please give that address.**

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

Who lives at this address? \_\_\_\_\_ Phone No. \_\_\_\_\_

**If you are currently employed or attending school, please complete the following:**

Employer/School \_\_\_\_\_

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

Phone No. \_\_\_\_\_ Work days/hours class \_\_\_\_\_

Yes  No Does the abuser know where you work / attend school?

### SECTION III

When did you meet the abuser? \_\_\_\_\_

What is your relationship to this person? (Check ONLY one.)

- Married-living together       Married-not living together       Divorced  
 Living together-not married       Used to live together- never married       Related by blood  
 Related by marriage       Dating/Used to date  
 Biological parents of same child-not married  
 Other - please specify: \_\_\_\_\_

If you were not married to this person, please provide the following information:

Date you began dating this person? \_\_\_\_\_ Date you stopped? \_\_\_\_\_

Number of times you dated this person? \_\_\_\_\_

Yes  No Were you ever formally engaged to this person?

Yes  No Did you ever live with this person? If yes, from when to when \_\_\_\_\_

Yes  No While you were living together, did you ever separate from this person?

If yes, how many times? \_\_\_\_\_ For how long? \_\_\_\_\_

If you were ever married to this person, where and when were you married? \_\_\_\_\_

Yes  No Have either one of you filed for a divorce from each other?

If yes, when? What state and county? \_\_\_\_\_

Yes  No Are you are divorced from the abuser?

When was your divorce final? \_\_\_\_\_ What state and county? \_\_\_\_\_

Yes  No Do you have a copy of the divorce decree? If yes, attach or provide a copy.

Yes  No Have you ever applied for a protective order against this person before?

If yes, when and where (county and state)? \_\_\_\_\_

Yes  No Have you ever been granted a protective order against this person before?

If yes, when and where (county and state)? \_\_\_\_\_

Yes  No Do you have an emergency protective order?

If yes, what police department? \_\_\_\_\_

Yes  No Has anyone ever applied for or gotten a protective order against you?

If yes, please explain: \_\_\_\_\_

#### SECTION IV

If you need additional space to answer any questions in this section, please use a separate sheet of paper.

When was the **LAST** time this person abused you? Date: \_\_\_\_\_

Describe what happened: \_\_\_\_\_

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Yes  No Did the abuser use any weapons or objects? If yes, what kind? \_\_\_\_\_

Injuries: \_\_\_\_\_

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Adult Witnesses: \_\_\_\_\_

Yes  No Did anyone call the police? If yes, what department? \_\_\_\_\_

Yes  No Was a report made? What did the police do? \_\_\_\_\_

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Yes  No Did you cooperate with the police?  Yes  No Did you give a video statement?

Yes  No Has this person abused you on any other occasions? If yes, how many? \_\_\_\_\_

Yes  No Were those incidents reported to the police?

What police/sheriff's departments \_\_\_\_\_

Dates and Case numbers? \_\_\_\_\_

**SECTION V**

Yes No Are you currently on probation?      Yes No Do you have a criminal case pending?

Yes No Have you ever received any medical treatment because of abuse in this relationship?

If yes, please specify:

Emergency room    Hospitalization    Doctor's care    Dental care    Counseling

Where and by who? \_\_\_\_\_

Yes No If you are female, are you now pregnant?

Yes No If you are female, has this person ever abused you while you were pregnant?

**SECTION VI**

Yes No Has this person ever harmed any of your children? If yes, complete the following:

Dates of abuse: \_\_\_\_\_

Name of child/children: \_\_\_\_\_

Describe specifically what happened: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Yes No Has Child Protective Services ever been notified?

If yes, where did this occur \_\_\_\_\_

Yes No Have the police ever been notified of child abuse?

If yes, where did this occur \_\_\_\_\_

Yes No Have criminal charges ever been filed against this person for child abuse?

If yes, where, when \_\_\_\_\_

**SECTION VII**

Abuser's full name: \_\_\_\_\_

What other names does abuser use? \_\_\_\_\_

Sex: Male Female    Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Abuser's Race: \_\_\_\_\_ Driver's License No. and State: \_\_\_\_\_

Abuser's occupation: \_\_\_\_\_

Yes No Is the abuser currently employed? If yes, please complete the following:

Employer \_\_\_\_\_

Address City State Zip Code \_\_\_\_\_

Phone No. \_\_\_\_\_

When does the abuser work? Days: \_\_\_\_\_ Hours: \_\_\_\_\_

Where does the abuser live? \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_

Home Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

When is the best time to find abuser at home? \_\_\_\_\_

Yes  No Is there any other address where this person can be found?

If yes, please complete the following:

Whose lives there? \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address \_\_\_\_\_ CSZ \_\_\_\_\_

**Physical Description of Abuser:**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race/ethnicity: \_\_\_\_\_

Complexion: \_\_\_\_\_ Hair color: \_\_\_\_\_ Eye color: \_\_\_\_\_

Glasses?  Yes  No Contacts?  Yes  No Color of contacts? \_\_\_\_\_

Beard?  Yes  No Mustache?  Yes  No Other facial hair? \_\_\_\_\_

Tattoos? If any, describe: \_\_\_\_\_

Scars? If any, describe: \_\_\_\_\_

Body piercing? If any, describe: \_\_\_\_\_

Other identifying characteristics: \_\_\_\_\_

What kind of vehicle does this person drive? Year: \_\_\_\_\_ Make: \_\_\_\_\_

Model: \_\_\_\_\_ Color: \_\_\_\_\_ License plate no.: \_\_\_\_\_

Yes  No Does the abuser have any weapons? If yes, please list: \_\_\_\_\_

Yes  No Is the abuser a current or former member of the military?  Yes  No Law enforcement?

Yes  No Is this person currently on parole or probation?

Parole/Probation Office \_\_\_\_\_ Officer's name \_\_\_\_\_

On parole/probation for what crime? \_\_\_\_\_

- Yes No      Have you filed for a Protective Order in the Past?
- Yes No      Have you been the Respondent in a Protective Order in the Past?
- Yes No      Have you been arrested in the past?
- Yes No      Have you been prosecuted for a crime in Gregg County?
- Yes No      Do you understand that if a Protective Order is granted, you cannot allow the abuser to violate the Order?
- Yes No      Do you understand that you may be required to testify in court against the abuser?
- Yes No      Are you in fear of the abuser and believe that he/she is likely to commit further acts of violence against your or your children in the future?

**SECTION VIII**

Please provide information about your minor children:

Sex: M F      Race: \_\_\_\_\_  
 Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Home Address \_\_\_\_\_

School/Daycare attending & address \_\_\_\_\_

Sex: M F      Race: \_\_\_\_\_  
 Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Home Address \_\_\_\_\_

School/Daycare attending & address \_\_\_\_\_

Sex: M F      Race: \_\_\_\_\_  
 Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Home Address \_\_\_\_\_

School/Daycare attending & address \_\_\_\_\_

Sex: M F      Race: \_\_\_\_\_  
 Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Home Address \_\_\_\_\_

School/Daycare attending & address \_\_\_\_\_

Sex: M F      Race: \_\_\_\_\_





