

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

\_\_\_\_\_) ) Case No. \_\_\_\_\_ CI  
PETITIONER (protected person),  M  F )  
Birthdate: \_\_\_\_\_ )  
 Petitioner is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

\_\_\_\_\_) ) Case No. \_\_\_\_\_ CI  
PETITIONER (protected person),  M  F )  
Birthdate: \_\_\_\_\_ )  
 Petitioner is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

\_\_\_\_\_) ) Case No. \_\_\_\_\_ CI  
PETITIONER (protected person),  M  F )  
Birthdate: \_\_\_\_\_ )  
 Petitioner is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

\_\_\_\_\_) ) Case No. \_\_\_\_\_ CI  
PETITIONER (protected person),  M  F )  
Birthdate: \_\_\_\_\_ )  
 Petitioner is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

\_\_\_\_\_) ) Case No. \_\_\_\_\_ CI  
PETITIONER (protected person),  M  F )  
Birthdate: \_\_\_\_\_ )  
 Petitioner is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

v. )

\_\_\_\_\_) )  
RESPONDENT (restrained person),  M  F )  
Birthdate \_\_\_\_\_ )  
 Respondent is a child. Who is signing for the child? )  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ )  
Relationship to child: \_\_\_\_\_ )

**REQUEST TO MODIFY OR  
DISSOLVE PROTECTIVE ORDER  
(MULTIPLE PETITIONERS)**

**Note: This request does not, by itself, change the terms of the protective order. All parties must continue to obey the existing order until a judge modifies or dissolves the order in writing. If you fail to appear for a hearing about this request, your request may be denied.**

I, \_\_\_\_\_, a petitioner/respondent in this case, ask the court to:

- dissolve** the 20-day ex parte/long-term protective order issued in this case.
- modify** the 20-day ex parte/long-term protective order issued in this case as follows:

\_\_\_\_\_

\_\_\_\_\_

The reason(s) for this request are:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other Party's Telephone Numbers (if known): Home \_\_\_\_\_ Work \_\_\_\_\_

\_\_\_\_\_

Date Signature

A mailing address and message phone number are necessary for contacting you about the hearing. Victims are not required to disclose their personal addresses or phone numbers. A safe alternative way to contact you on short notice must be given to the court.

\_\_\_\_\_

Safe Mailing Address City State ZIP

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

I certify that on \_\_\_\_\_ a copy of this request was  given  mailed to:

- Petitioners \_\_\_\_\_  Person signing for minor petitioners \_\_\_\_\_
- Respondent \_\_\_\_\_  Person signing for minor respondent \_\_\_\_\_

Clerk: \_\_\_\_\_