SHERIFF'S OFFICE DOMESTIC, REPEAT, DATING, SEXUAL, STALKING VIOLENCE & VULNERABLE ADULT WORKSHEET

	al Information		CASE NUMBI	ER:	
1.	How are you related to	o the Respondent:			
2.	2. If you are married to the Respondent, what is the date of your marriage:				
3.	Was a law enforcement officer called as a result of the Violence or Vulnerable Act:				
4.	Was an arrest made:_	If yes, <u>y</u>	when was the Respond	dent arrested:	
5.	Give "DOB & Name"	" – "Race & Gender	." of any minor childr	en between you & the Res	pondent or "if" O/B/O
	()		()	
	()		()	
6.	IMPORTANT: Who	is in physical posses	sion of the minor child	d(ren) at this time: Please	check one:
	Petitioner	, Respondent:	, Ot	ther:	
7.	Vulnerable Adult In	junctions: Does the y	victim own or rent the	occupied residence	Yes No
8.	If residence owned or	rented by Responder	nt, who will take custo	ody of vulnerable adult:	
9.	If Respondent is remove	ved from the victim's l	nome, who will take cu	stody of vulnerable adult: _	
10.	If petition filed O/B/O), does the petitioner	want to be present wh	en petition is served on V.	A YesNC
	ner Information			rved:	
	Name:			Pnone #	
1.					
1. 2.	Home Address:				
1. 2. 3.	Home Address: Place of Emp & Add	d:			
1. 2. 3.	Home Address: Place of Emp & Add Date of birth:	d:	Race:		
1. 2. 3. 4.	Home Address: Place of Emp & Add Date of birth:	d:	Race: Eye Color:	Gender:Hair Color: _	
1. 2. 3. 4.	Home Address: Place of Emp & Add Date of birth: Hgt:	d: _ Wgt: *** Every Ques	Race: Eye Color: stion Must Be Ansv	Gender:Hair Color: _	
1. 2. 3. 4. Respon	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent companies.	d: _ Wgt: *** Every Ques urrently in Jail	Race: Eye Color: stion Must Be Ansv No	Gender: Hair Color: vered *** Yes	Where?
1. 2. 3. 4. Responsi	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent continue:	d:Wgt:*** Every Quesurrently in Jail	Race: Eye Color: stion Must Be Ansv No	Gender: Hair Color: _ vered *** Yes Phone#	Where?
1. 2. 3. 4. Responding 2. 3. 3.	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent contains Name: Home Address:	d:	Race: Eye Color: stion Must Be Ansv No	Gender: Hair Color: vered *** Yes Phone#	Where?
1. 2. 3. 4. Responding 2. 3. 3.	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent contains Name: Home Address: Place of Emp & Address	d:	Race: Eye Color: stion Must Be AnsvNo	Gender: Hair Color: vered *** Yes Phone#	Where?
1. 2. 3. 4. Responsible 1. 2. 3. 4.	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent contains Name: Home Address: Place of Emp & Add Work days & hours:	d:Wgt:w*** Every Quesurrently in Jail	Race: Eye Color: stion Must Be AnsvNo	Gender: Hair Color: vered *** Yes Phone#	Where?
1. 2. 3. 4. 2. 3. 4. 5. 6.	Home Address: Place of Emp & Add Date of birth: Hgt: ndent Information Is the Respondent of Name: Home Address: Place of Emp & Add Work days & hours: Date of birth (prefer	d:Wgt:w*** Every Questurrently in Jaild:	Race: Eye Color: stion Must Be AnsvNo	Gender: Hair Color: Vered *** Yes Phone# Wk Phone # Race:	Where?
1. 2. 3. 4. 2. 3. 4. 5. 6.	Home Address: Place of Emp & Add Date of birth: Hgt: Indent Information Is the Respondent of Name: Home Address: Place of Emp & Add Work days & hours: Date of birth (preferent	d:	Race: Eye Color: stion Must Be Ansv No Eye color:	Gender: Hair Color: vered *** Yes Phone#	Where?