

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

_____))
PETITIONER (protected person),)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____) Case No. _____ CI
v.)
_____))
RESPONDENT (restrained person),)
Birthdate: _____)
 Respondent is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)

**REQUEST TO EXTEND
LONG-TERM PROTECTIVE
ORDER (ONE PETITIONER)**

[Use this form if you want to extend an existing domestic violence, sexual assault, or stalking protective order. You may also ask to modify (change) your protective order with this form.]

When to file your request: File this form within 30 days before or within 60 days after your current long-term order expires. If more than 60 days have passed since your order expired, you must file a new petition for a protective order instead of using this form.

What happens after you file: The court will set a hearing with at least 10 days' notice to both parties and will decide whether an extension is necessary to protect you. **This request, by itself, does not extend the protective order. If your current order expires before the hearing, there will not be a protective order in place until the court extends it in writing at the hearing, or until you request a new order based on a new domestic violence petition and incident.** If you fail to appear for a hearing about this request, the judge may deny your request.

1. I am the petitioner.
2. I ask the court to extend the long-term protective order issued in this case.
3. I request the terms of the protective order remain the same. be modified as follows:

4. Extending the protective order for one more year is necessary to protect me, because:

5. I filled out and attached *Confidential Law Enforcement Information Sheet*, [DV-127](#), to this request.

Date Signature Print or Type Name

Write below your mailing address, email, and message phone number so the court can contact you about the hearing. You do not have to use your actual address, email, or phone number. Instead, you can provide safe alternatives, but you must be able to check them on short notice. **If you write your contact information on this form, it will not be confidential.** If you have no contact information that can be safely given to the other party, contact the court clerk for instructions on how to give this information only to the court.

Safe Mailing Address City State ZIP

Safe Phone Number: _____ Safe Email: _____

Leave This Section Blank for the Court to Fill Out

I certify that on _____, a copy of this request was distributed to:

Respondent Person signing for minor respondent _____

Clerk: _____

Clerk Instruction: If not timely filed, enter docket DV132LODGED and route to judge.