

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

_____ )	
PETITIONER (protected person), )	
Birthdate: _____ Identifies as: <input type="checkbox"/> M <input type="checkbox"/> F )	
<input type="checkbox"/> Petitioner is a child. Who is signing for the child? )	
Name: _____ Birthdate: _____ )	
Relationship to child: _____ )	Case No. _____
v. _____ )	
RESPONDENT (restrained person), )	
Birthdate: _____ Identifies as: <input type="checkbox"/> M <input type="checkbox"/> F )	
<input type="checkbox"/> Respondent is a child. Who is signing for the child? )	
Name: _____ Birthdate: _____ )	
Relationship to child: _____ )	

**REQUEST TO DISSOLVE  
A PROTECTIVE ORDER  
(ONE PETITIONER)**

*[This form should be used if you wish to dissolve an existing domestic violence, sexual assault, or stalking protective order.]*

**This request, by itself, does not end the protective order. All parties must follow the existing protective order until a judge ends it in writing. If you fail to appear for a hearing about this request, the judge may deny your request.**

1. I am the ☐ petitioner ☐ respondent in this case.
2. The most recent protective order in this case was issued on (date) \_\_\_\_\_.
3. I ask the court to end the:  
☐ short-term protective order and withdraw any long-term petition in this case.  
☐ long-term protective order issued in this case.
4. I agree with each of the following statements: *(Check each one)*  
☐ It is my free and voluntary choice to make this request. No one forced, coerced, or threatened me to get me to make this request.  
☐ I believe I will be safe if the request is granted.  
☐ I understand I can ask the court to make changes to the order without dissolving the order entirely.  
☐ If my request is granted and the order is dissolved, I understand I can file a new petition if necessary.
5. The reason(s) for this request are:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. ☐ I would like to speak with a Victim's Advocate before the Judge makes a decision. I can be available: ☐ in person. ☐ by telephone.
7. Other party's telephone numbers (if known): Home \_\_\_\_\_ Work \_\_\_\_\_

_____ Date	_____ Signature
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Provide your mailing address and message phone number so the court can contact you about the hearing. You do not have to use your actual address or phone number. Instead, you can provide safe alternatives so that the court can contact you on short notice.

_____ Safe Mailing Address	_____ City	_____ State	_____ ZIP
Work Phone: _____	Home Phone: _____		

Certificate of Service

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

<input type="checkbox"/> Petitioner _____	<input type="checkbox"/> Person signing for minor petitioner _____
<input type="checkbox"/> Respondent _____	<input type="checkbox"/> Person signing for minor respondent _____

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