

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

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

**REQUEST TO DISSOLVE  
PROTECTIVE ORDERS  
(MULTIPLE PETITIONERS)**

*[Use this form if you want to **end** existing domestic violence, sexual assault, or stalking protective orders. If you want to **change** the protective orders, use [DV-131](#).]*

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

1. Name of person filing this form: \_\_\_\_\_.
2. The most recent protective orders in these cases were issued on \_\_\_\_\_ [date].
3. I ask the court to end the  
 short-term protective orders and withdraw any long-term petition in these cases.  
 long-term protective orders issued in these cases.
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 all the petitioners will be safe if the request is granted.  
 I understand I can ask the court to make changes to the orders without dissolving (ending) the orders entirely.  
 If my request is granted and the orders are dissolved, I understand I can file a new petition or petitions if necessary.
5. The reasons for this request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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): Cell \_\_\_\_\_ Work \_\_\_\_\_  
Other party's email address (if known): \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Signature

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  emailed  mailed  given to:  
 Petitioners  Person signing for minor petitioners \_\_\_\_\_  
 Respondent  Person signing for minor respondent \_\_\_\_\_  
Clerk: \_\_\_\_\_