

ATTACHMENT "A" Victim's Request to Modify Criminal Protection Order -

Defendant Name: _____ Case #: _____ D.O.B. _____
 Victim Name: _____ Phone: _____
 Address: _____ Email: _____
 Children Names and Ages: _____

I, _____, a victim in this case request the following modifications to the criminal protection order, sentence and/or bond conditions:

<input type="checkbox"/> 1. Request LIMITED contact with the defendant as follows: <input type="checkbox"/> Telephone contact <input type="checkbox"/> Parenting Decisions <input type="checkbox"/> E-mail or electronic contact <input type="checkbox"/> Contact to mirror that allowed in divorce or custody case <input type="checkbox"/> Public places contact Request above contact to be limited as follows: <input type="checkbox"/> Financial issues <input type="checkbox"/> Contact through a third party: <input type="checkbox"/> Parenting and child exchange	<input type="checkbox"/> No Objection <input type="checkbox"/> Objection Recommended restrictions on contact: _____ _____ _____
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<input type="checkbox"/> 2. Request the "no contact with victim" provision be vacated	<input type="checkbox"/> No Objection <input type="checkbox"/> Objection
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<input type="checkbox"/> 3. Request the "exclusion from the family home" provision be vacated	<input type="checkbox"/> No Objection <input type="checkbox"/> Objection
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<input type="checkbox"/> 4. Request other modifications explained below:	<input type="checkbox"/> No Objection <input type="checkbox"/> Objection
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Other information for the Court to consider:

- I understand that this request DOES NOT automatically change the "No Contact" condition, and that this process may take up to the next court date, or longer, after my written request.
- I understand each request for modification of a protection order is reviewed individually by the District Attorney's Office. I also understand that the District Attorney's Office may object to the request if the defendant has had any prior assault arrests, if injuries were sustained, if a weapon of any kind was used, if children were present, if there is any unreported abuse or based upon other circumstances.
- I understand this form must be submitted through the DA's Office at least 48 hours before the next court date. I must be present at the scheduled court date to address this request. I understand the Judge makes the final decision regarding my request.
- I understand that only certain provisions will be modified and if I receive notice that the Protection Order has been modified allowing contact or a return to the residence, THE OTHER BOND CONDITIONS ARE STILL IN EFFECT, such as no alcohol, no weapons, etc. Additionally, the standard terms of the C.R.S. §18-1-1001 will remain in effect prohibiting the Defendant from, "harassing, molesting, intimidating, retaliating against, or tampering with any witness to or victim of the acts charged". _____ (please initial that you understand)

I acknowledge that no inducements, threats or promises have been made to me by anyone for the purpose of obtaining a change in the nature of the criminal protection order, and that this request is a free and voluntary act done of my own volition. Further, I hereby represent I am not under the influence of any medication, prescription drug or intoxicant at the time of this request. I understand this document and its concerns.

Signature _____ Date _____