

The court clerk will give you these numbers. Use them on all forms you file later.

1 Case No. \_\_\_\_\_  
 2 Dept. No. \_\_\_\_\_

3 IN THE JUSTICE COURT OF \_\_\_\_\_ TOWNSHIP  
 4 COUNTY OF \_\_\_\_\_ STATE OF NEVADA

5 \_\_\_\_\_ )  
 6 Employer, )  
 7 )  
 8 vs. )  
 9 )  
 10 Adverse Party, )

11 (NOTE: There can only be one adverse party.)

12 PLEASE TYPE OR PRINT CLEARLY.

13 COMPLETE THE APPLICATION TO THE BEST OF YOUR KNOWLEDGE

14 HARASSMENT IN THE WORKPLACE — Under NRS 33.240, harassment in the  
 15 workplace occurs when:  
 16 1. A person knowingly threatens to cause or commits an act that causes:  
 17 (a) Bodily injury to himself or another person;  
 18 (b) Damage to the property of another person; or  
 19 (c) Substantial harm to the physical or mental health or safety of a person;  
 20 2. The threat is made or the act is committed against an employer, an employee  
 21 of the employer while the employee performs his duties of employment or a  
 22 person present at the workplace of the employer; and  
 23 3. The threat would cause a reasonable person to fear that the threat will be  
 24 carried out or the act would cause a reasonable person to feel terrorized,  
 25 frightened, intimidated or harassed.

Applicant states the following facts under penalty of perjury:  
 I am the employer or authorized agent of the employer, and I reasonably believe that the Adverse  
 Party threatens to cause or commits an act of harassment in the workplace. The Temporary  
 Order should be extended for the following reasons:

1 of 3

Application for Extended Order for Protection Against Harassment in the Workplace January 2007

Employer's name

Full name of the person you want the order(s) against.

The name of the township in which you are filing your case.

The name of the county in which you are filing your case.

This is the most important part of your Application. This information will explain to the judge why this extended order is needed. Give details of the most recent incidents, if any.

1	Facts from the original Application filed and/or Temporary Order entered in this cause
2	have been incorporated by reference.
3	Subsequent or additional acts have occurred as follows:
4	<b>NOTE: BE SPECIFIC AS TO WHO THREATENED OR COMMITTED WHAT ACT OR ACTS AND AGAINST WHOM. INDICATE APPROXIMATE DATE(S) AND LOCATION(S). ALSO LIST SPECIFIC EMPLOYEE(S)/PERSON(S) PRESENT AT THE WORKPLACE WHO ARE THE FOCUS OF THE HARASSMENT OR WHOM THE ADVERSE PARTY SHOULD BE DIRECTED NOT TO CONTACT. THE FACTS YOU STATE HERE MUST PROVIDE THE BASIS FOR GRANTING AN <u>EXTENDED ORDER</u> FOR PROTECTION AGAINST HARASSMENT IN THE WORKPLACE.</b>
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8	<b>THIS FORM IS A PUBLIC RECORD</b>
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23	<b>NOTE: PLEASE DO NOT WRITE ON THE BACKS OF ANY PAGES; CHECK BOX IF YOU ARE USING ADDITIONAL PAGES.</b>
24	<input type="checkbox"/> Check if you use a continuation page (to be incorporated by reference)
25	

If you need more space, request a Continuation Page.

1

**RELIEF REQUESTED**

2

3 **THEREFORE, I REQUEST** that an Extended Order for Protection Against Harassment

4 in the Workplace be issued against the Adverse Party so that the Adverse Party will be enjoined

5 from contacting, intimidating, threatening, or otherwise interfering with the employer's business

6 and/or its employees and/or any person present at the workplace, and that the Adverse Party will

7 be ordered to stay away from the employer's workplace. I also request that the Court prohibit

8 the Adverse Party from violating this Order via electronic mail (e-mail), facsimile (fax),

9 correspondence, telephone, or through another person.

10 **I FURTHER REQUEST** the following other conditions: \_\_\_\_\_

11 \_\_\_\_\_

12

**DECLARATION**  
(NRS 53.045)

13

14

15 I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF

16 NEVADA THAT: (1) I AM THE APPLICANT (EMPLOYER OR AUTHORIZED AGENT)

17 HEREIN, (2) I HAVE READ THE STATEMENTS CONTAINED HEREIN OR HAVE HAD

18 THEM READ TO ME, (3) I BELIEVE THESE STATEMENTS TO BE TRUE, AND (4) THE

19 REQUESTED ORDER IS NEEDED.

20

21 DATE \_\_\_\_\_

22

APPLICANT'S SIGNATURE \_\_\_\_\_

23

PRINT NAME \_\_\_\_\_

24

25

3 of 3

Application for Extended Order for Protection Against Harassment in the Workplace January 2007

If you need relief not listed above, please list it here.

Date the Application.

Sign the Application.