

## TCIC Protective Order Data Entry Form

*To be completed by the Criminal Justice/Law Enforcement Official and released to authorized agencies only.*

ORI:	Choose One: Protective Order      Emergency Protective Order		
OCA:	Protective Order Number:	Court Identifier:	
Issue Date:	Date of Expiration:	Date Signed:	Date Rescinded:

**ALL fields should be completed to ensure timely entry into TCIC. Missing pertinent information will delay entry and will require the entering agency to contact the court to provide the necessary information.**

Respondent Name:				Sex: Male    Female	
Race: (circle one): Indian    Asian    Black    White    Unknown				Ethnicity: (circle one) Hispanic    Non-Hispanic    Unknown	
Place of Birth:	Citizenship:	Date of Birth:	Height:	Weight:	
Skin: (circle one): Albino    Black    Dark    Dk Brown    Fair    Light    Lt Brown    Medium    Med Brown    Olive    Ruddy    Sallow    Yellow					
Eye Color: (circle one): Black    Blue    Brown    Gray    Green    Hazel    Maroon    Pink    Multi-Colored    Unknown					
Hair Color: (circle one) Black    Blond    Brown    Gray    Red    White    Sandy    Bald    Blue    Green    Orange    Pink    Purple    Unknown					
Scars, Marks and/or Tattoos: (please describe in detail)					
AKA's:					
Caution and Medical Conditions: (circle all that apply)					
00 – Armed and Dangerous	05—Violent Tendencies	10—Martial Arts Expert	15—Explosive Expertise	40-Int'l Flight Risk	
20—Known to Abuse Drugs	25—Escape Risk	30—Sexually Violent Predator	50—Heart Condition		
55—Alcoholic	60—Allergies	65—Epilepsy	70—Suicidal		
80—Medication Required	85—Hemophiliac	90—Diabetic	01—Other		
Protection Order Conditions (PCO): (circle all that apply)					
01    Respondent is restrained from assaulting, threatening, abusing, harassing, following, interfering with or stalking the protected person and/or child of the protected person					
02    Respondent may not threaten a member of the protected person's family/household					
03    The protected person is granted exclusive possession of the residence/household					
04    Respondent is required to stay away from the residence, property, school or place of employment of the protected person or other family or household member					
05    Respondent is restrained from making any communication with the protected person including, but not limited to, personal, written, or phone contact, or their employers, employees or fellow workers, or others whom the communication would be likely to cause annoyance or alarm					
06    Respondent is awarded temporary custody of the children named					
07    Respondent is prohibited from possessing and/or purchasing a firearm or other weapon					
08    See miscellaneous field for comments regarding terms and conditions of the protection order (add all prohibitions ordered <u>not</u> already assigned a code, e.g. pets, utilities, mutually owned property, distance, bond conditions, visitation details and/or other special prohibitions).					
09    The protected person is awarded temporary exclusive custody of the child(ren) named					
Brady Record Indicator (BRD): N—Respondent is NOT disqualified    Y—Respondent is disqualified    U—Unknown			SVC:(circle one) served/not served/unknown SVD:		
Relationship To Protected Person: (Not the additional PPNS)					

*Please include the following numeric identifiers, if available:*

Driver License:	DL State:	DL Expiration:
Texas ID:	Misc ID:	Social Security:

Respondent Address:			
City:	County:	State:	Zip:

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Respondent Name:
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*Respondent Vehicle Data:*

License Plate:	LP State:	LP Year:	LP Type:
Vehicle ID:	Year:	Color:	
Make:	Model:	Style:	

*Protected Person Data*

Protected Person Name:	Sex: Male Female		
Race: (circle one): Indian Asian Black White Unknown	Ethnicity: (circle one) Hispanic Non-Hispanic Unknown		
Date of Birth:	Social Security:		
Protected Person Address:			
City:	County:	State:	Zip:

*Protected Person Employer Data*

Protected Person Employer Name:	Address:	
City:	State:	Zip:
Protected Person Employer Name:	Address:	
City:	State:	Zip:

*Protected Child Data (Use additional pages if necessary)*

Protected Child Name:	Sex: Male Female		
Race: (circle one): Indian Asian Black White Unknown	Ethnicity: (circle one) Hispanic Non-Hispanic Unknown		
Date of Birth:	School/Child Care Name and Address:		
Home Address:	City:	State:	Zip:
Protected Child Name:	Sex: Male Female		
Race: (circle one): Indian Asian Black White Unknown	Ethnicity: (circle one) Hispanic Non-Hispanic Unknown		
Date of Birth:	School/Child Care Name and Address:		
Home Address:	City:	State:	Zip:

*To be completed by Criminal Justice/Law Enforcement Official:*

SID:	FBI #:	FPC:	MNU:
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Notes:

Use of Pseudonyms; Code of Criminal Procedures: Art. 57B.02. (Confidentiality of files and records)  
 Extension of PO if Respondent is confined or imprisoned; Family Code: Sec. 85.025 (Duration of Protective Order)  
 PCO-07-Possession of a firearm; Family Code: Sec. 85.0222 (Requirements of order applying to person who committed family violence).  
 SB 1242-Chapter 85-F.C. Sect 85.007- the court shall order the clerk to maintain a confidential record of the information for use only by: (A) the court; or (B) a law enforcement agency for purposes of entering the information required by Section 411.042 (b) (6), Govt. Code into the statewide law enforcement information system maintained by the Department of Public Safety. (Eff. 9/1/17)