

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

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.

1	Case No. _____
2	Dept. No. _____
3	IN THE JUSTICE COURT OF _____ TOWNSHIP
4	COUNTY OF _____ STATE OF NEVADA
5	_____, )
6	Employer, )
7	)
8	)
9	vs. )
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	<b>HARASSMENT IN THE WORKPLACE</b> — 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

If you need more space, request a Continuation Page.

**RELIEF REQUESTED**

**THEREFORE, I REQUEST** that an Extended Order for Protection Against Harassment in the Workplace be issued against the Adverse Party so that the Adverse Party will be enjoined from contacting, intimidating, threatening, or otherwise interfering with the employer's business and/or its employees and/or any person present at the workplace, and that the Adverse Party will be ordered to stay away from the employer's workplace. I also request that the Court prohibit the Adverse Party from violating this Order via electronic mail (e-mail), facsimile (fax), correspondence, telephone, or through another person.

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

**DECLARATION**  
**(NRS 53.045)**

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF NEVADA THAT: (1) I AM THE APPLICANT (EMPLOYER OR AUTHORIZED AGENT) HEREIN, (2) I HAVE READ THE STATEMENTS CONTAINED HEREIN OR HAVE HAD THEM READ TO ME, (3) I BELIEVE THESE STATEMENTS TO BE TRUE, AND (4) THE REQUESTED ORDER IS NEEDED.

DATE \_\_\_\_\_

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

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

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.