

QUESTIONNAIRE - CHILD CUSTODY AND/OR CHILD SUPPORT

Please complete all information on this form prior to your appointment

Date: _____ Referred by: _____

SECTION 1

Your full name: _____
(First) (Middle) (Last)

Mailing Address: _____ Physical Address (If Different): _____

Contact Info: Home: _____ Work: _____
Cell: _____ Email: _____

Date of Birth: _____ What is your relationship to the minor children?
Social Security No.: _____
Driver's License No.: _____
State of Issuance: _____

SECTION 2 (attach additional pages if necessary)

Children's Information:

Full Legal Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Social Security No.: _____

County & State of Birth: _____

Full Legal Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Social Security No.: _____

County & State of Birth: _____

Full Legal Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Social Security No.: _____

County & State of Birth: _____

SECTION 3 (attach additional pages if necessary)

Parent Information

Mother's Full Legal Name: _____ Father's Full Legal Name _____

Address: _____ Address: _____

DOB: _____ DOB: _____

SSN: _____ SSN: _____

Were the parents of the children married to each other?
Y / N (circle one) If yes, please complete the information below.

Date of Marriage: _____ Date of Separation: _____ Divorced: Y / N

Place of Marriage (County & State): _____

If Divorced, provide date of divorce and County and State that the Judgment for Divorce was entered:
County: _____ State: _____

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SECTION 4

***List all addresses where the minor children have lived for the past five (5) years and with whom they resided ***

Please list the most current address first

From:	_____	to	Present	_____
With?	_____			_____
From:	_____	to	_____	_____
With?	_____			_____
From:	_____	to	_____	_____
With?	_____			_____
From:	_____	to	_____	_____
With?	_____			_____

Is there a current child custody order in effect?	Y / N (circle one)	Date of Custody Order:	_____
Is there a current child support or in effect?	Y / N (circle one)	Monthly amount ordered:	_____
Is child support currently in arrears?	Y / N (circle one)	Date of Child Support Order:	_____
If child support is in arrears, how much is owed?			_____

If there is a current order in effect for child custody and/or child support, please list what County and State the order was issued from: _____

Did you bring a copy of the order(s) with you? Y / N (circle one)

If there have been other attorneys involved in this matter, please list there names and who they represented:

Please list your current employment status, employer and current earnings:

If known, please list the current employment status, employer and earnings of the other parent or parties responsible for the children:

Has the Department of Social Services been involved with your family? If so, provide information concerning when and why the Department of Social Services has made contact concerning the minor child(ren):

IS THIS AN EMERGENCY MATTER DUE TO NEGLECT, ABUSE OR DOMESTIC VIOLENCE?

Y / N (circle one)

Please list other information that might be pertinent to your case:

