

CHILD CUSTODY/VISITATION QUESTIONNAIRE

Personal Information

Full Name (including maiden): _____

Relationship to minor(s): _____

Address: _____

Home #: _____ Cell # _____ Work #: _____

SS#: _____

Spouse's Full Name or person wanting/giving custody too (including maiden): _____

Address: _____

Home #: _____ Cell # _____ Work #: _____

SS#: _____

Are you and the plaintiff/defendant divorced or still married? _____

If divorced please state date of divorce and where the divorce was granted: _____

Date last separated (month/year) _____

Please list children from this marriage:

| Name | Age | Sex | DOB | SSN |
|------|-----|-----|-----|-----|
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Note - if more than 4 children please attach additional page.

General Information

Have you appeared in court or agreed on terms related to this matter? ☐ Yes ☐ No

Do you have copies of any documents (court decrees, dissolution agreements, etc.)

related to this matter? ☐ Yes ☐ No

What types of documents do you have? _____

Next Court Date: _____ Are both parties served? ☐ Yes ☐ No

Court Action #: _____ Dept. #: _____

Both parties use English? ☐ Yes ☐ No

Custody/Visitation Arrangements

Which party desires legal custody? Client ☐ Spouse ☐ Joint ☐

Whom are the child(ren) in this matter living with now? _____

What was the custody/visitation arrangement when you initially separated? _____

How many hours/days per week? _____

Has the custody/visitation arrangement changed? ☐ Yes ☐ No

If so, please describe the first change and any later changes and explain why the change(s) occurred and to what number of days/hours per week. _____

Describe the visitation schedule you are interested in obtaining: _____

If a change in custody has reduced or terminated your child(ren)'s contact with you, what was the reason given? _____

With whom will the primary residency be? Client ☐ Spouse ☐ Joint ☐

Have you previously had supervised visitation ordered? ☐ Yes ☐ No

How long were you restricted to supervised visitation? _____

Do you currently have supervised visitation ordered? ☐ Yes ☐ No

How long are you restricted to supervised visitation? _____

Are you or your children a victim of family violence (battering or sexual abuse)? ☐ Yes ☐ No

Have you petitioned to move to another location? ☐ Yes ☐ No

Where do you currently reside? City _____ State _____

Where do you plan to move? City _____ State _____

Please explain your reasons for relocating _____

Where does the other parent live? City _____ State _____

If you have had court hearings regarding residency or visitation, please describe what happened. _____

Allegations

Do you want to raise any of the following issues? (Check only if allegations made)

- ☐ Drug/Alcohol Abuse
- ☐ Child Abuse
- ☐ Domestic Violence
- ☐ Child Stealing
- ☐ Juvenile Court Actions

Is there a Restraining Order currently in place? ☐ Yes ☐ No

a. What type of Restraining Order? ☐ DVPA ☐ Other ☐ Civil ☐ Criminal ☐ Emergency (EPO) ☐ Juv. Ct. ☐ Unknown ☐ Temporary

b. Who does the Restraining Order restrain? _____

c. Who does the Restraining Order Protect? _____

When does it expire? _____

Has anyone alleged Parental Alienation Syndrome (or some other alleged scientific theory) to deprive you of custody? ☐ Yes ☐ No

If other than "Parental Alienation Syndrome" is there any other theory being alleged? ☐ Yes ☐ No

If so, what theory? _____

Were you accused of any other psychological condition which is not a valid diagnosis? ☐

Yes ☐ No ☐ If yes, describe _____

Miscellaneous

Which party will provide healthcare? Client ☐ Spouse ☐ Joint ☐

Are parties going to share health insurance deductible/co-insurance? ☐ Yes ☐ No

Will each party provide life insurance with the child(ren) as beneficiary? _____

Which party will claim the tax deduction allowed for child(ren)? _____

Are you or any person involved in this matter currently pregnant? ☐ Yes ☐ No

Are parties agreeable to grandparents' visitation? ☐ Yes ☐ No

If so what visitation schedule would you like for:

The Maternal Grandparents: _____

The Paternal Grandparents: _____

Financial Data

A. Income

Gross Income Client: \$_____ Spouse: \$_____

Other Income Client: \$_____ Spouse: \$_____

Total Gross Income Client: \$_____ Spouse: \$_____

Total Net Income Client: \$_____ Spouse: \$_____

B. Bank Information

| Type of Account | Owner | Est. Value | Bank |
|-----------------|-------|------------|------|
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| | | | |
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C. Debts

| Creditor | Monthly payment | Total Owed | Property Mort. |
|----------|-----------------|------------|----------------|
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Schedules

Current custody arrangement/schedule

Percentage of time (i.e. 50/50, 60/40, 70/30, etc.) _____

Pick-ups _____

Days and time each child is with each parent _____

Date that this arrangement began/ended: _____

How was this schedule agreed on (i.e. agreement, mediation, stipulation, court ordered, ex parte, etc.)? _____

Describe any other custody arrangements/schedules: _____

Describe your current work schedule _____

Do you plan to use day care? ☐ Yes ☐ No If so, how often? _____

Do you plan to use close family members/relatives provide child care? ☐ Yes ☐ No

If so, how often? _____

Describe the role of the family support system (i.e. the children's grandparents, uncles, aunts, etc.): _____

Where will children be when you are working? _____

Who will be available to watch the children while you are at work? _____

Previous Actions

Have there ever been any allegations of domestic violence, drugs/alcohol, child abuse, etc. ☐ Yes ☐ No

Has either party made sworn allegations of domestic violence against the other? ☐ Yes ☐ No

If yes, who has made the allegations? _____ Who are the allegations against? _____

Has there ever been any involvement of police, child protective services, social services, etc.? ☐ Yes ☐ No

Describe any OSC's (Order to Show Cause) that have been filed: _____

Who brought the OSC and why (i.e. move-away, allegations of abuse, neglect, domestic violence, ex parte, etc.)? _____

What were the main complaints in both parties' declarations? _____

Date OSC was filed, county and courthouse, name of presiding judge: _____

Briefly, what was the outcome of this OSC (i.e. parenting classes, custody evaluation, transfer of custody, increase/decrease in time share of children, ex parte, etc.)? _____

Has there ever been a Custody Evaluation? ☐ Yes ☐ No

Who has made the allegations (judge, father's attorney, court personnel, etc.)? _____

What other accusations have been made against you? _____

Have you ever been put in jail or a mental health facility because of anything directly related to your family law case? ☐ Yes ☐ No If yes, please explain. _____

What accusations have you made against the father? _____

What has happened as a result of the allegations (change in custody, visitation, etc.)? _____

Were findings made that you were an unfit parent? ☐ Yes ☐ No

Do you have a history of mental illness? ☐ Yes ☐ No

Do you have a history of drug/alcohol abuse? ☐ Yes ☐ No

Do you have a criminal history? ☐ Yes ☐ No

Have you gone to a mediator who listens to both sides of the dispute and then writes a report to the judge? ☐ Yes ☐ No

Mediator[s] name[s]: _____

Were you required to mediate with an ex spouse/partner who perpetrated any form of abuse against you or your children? ☐ Yes ☐ No

Did the mediator[s] issue a report[s]? ☐ Yes ☐ No

Did you receive a copy of the report[s]? ☐ Yes ☐ No

What did the report[s] say? _____

Did you disagree with the mediator's report because it contained false, misleading, inaccurate or incorrect information? ☐ Yes ☐ No Please state what the report says and how you disagree. _____

Were you accused of physically or sexually abusing your child? ☐ Yes ☐ No

Did you challenge the report? ☐ Yes ☐ No If yes, please explain what happened. _____

Did the judge make a ruling based on the mediator's report even though you disagreed with it? ☐ Yes ☐ No

Have you had a custody evaluation before an evaluator who performs factual investigations and/or psychological tests? ☐ Yes ☐ No

Evaluator[s] name[s]: _____

Did the evaluator[s] issue a report[s]? ☐ Yes ☐ No

Did you receive a copy of the report[s]? ☐ Yes ☐ No

What did the report[s] say? _____

Please describe anything in the evaluator's report you considered false, misleading, inaccurate or incorrect information _____

Did you object to the evaluator's report? ☐ Yes ☐ No If yes, please explain what happened: _____

What were the proposals of each party at the beginning of the evaluation? _____

What were the main arguments/concerns of both parties (i.e. allegations, neglect, abuse, alcohol/drugs, unfit, move-away, school, stepparent, siblings, etc.)? _____

Describe the evaluation process (i.e. interviews, collateral information, psychological testing, MMPI-2, Gardner's parenting scale, etc.): _____

Describe the evaluator's recommendations (i.e. parenting classes, custody arrangement/schedule, time share with children, etc.): _____

Why do you think the evaluator came to this conclusion? _____

How long have you been involved in contested custody proceedings? _____

Has the judge ever issued a final judgment to end the proceedings after an award of custody? ☐ Yes ☐ No

Have you tried to appeal the custody order? ☐ Yes ☐ No

If yes, was the case ever set up for appeal? ☐ Yes ☐ No

If no, what happened to the appeal?

Health Concerns

State the physical health, any chronic illness or medicine taken regularly of all parties to this action: _____

State the mental health history, marriage counseling or hospitalizations of all parties to this action: _____

Are any mental/emotional health problems related to divorce/custody disputes or to long-term instability? ☐ Yes ☐ No

Has there been any drug and/or alcohol involvement by either party or stepparents? ☐ Yes ☐ No

If yes, how much; what treatment has been sought; and what has that individual's response been to that treatment? _____

Moral Issues

Are there any romantic relationships by either party? ☐ Yes ☐ No If yes, how have the relationships affected the child? _____

Is foul language used by either party in front of the child? ☐ Yes ☐ No

If yes, what effect has the language been on the child? _____

What do you see as your strengths and weaknesses or your moral beliefs? _____

What are the other party's strengths and weaknesses or moral beliefs? _____

Family Relations

Explain briefly, your relationship with other parent and your children: _____

How and why the relationship dissolved (please describe briefly)? _____

Describe your relationship with your children: _____

Describe the children's relationships with the other parent: _____

What is the child's relationship to other siblings? _____

How do you think the child perceives the family unit? _____

What future home is proposed by the petitioning party; and what future relationships would that involve? _____

Do you have any immediate prospects of remarriage or a continuing relationship with a person who will be involved in the life of the child? _____

Describe the present custodial home: _____

Describe the proposed custodial home (i.e., Is it in the same geographic location?)
_____ (How will a move affect the child?): _____

Who sleeps where in each home? _____

Describe the housekeeping standards of each home: _____

What is the address of the custodial home; the length of time in the home; and who lives there? _____

Parenting Responsibilities

Who purchases the children's clothes, toys, and other equipment? _____

Who arranges for and takes the child to doctor/dentist appointments? _____

Who arranges for the babysitter/child care? _____

Are there any special needs of the child (medical, educational, speech, etc.)? _____

What is being done about these special needs and which party is attending to this? Who is better able to deal with this? _____

How well do you manage money? _____

Please state your answer and the degree of responsibility you and your spouse should have regarding each of the following:

Education _____

Religious training _____

Discipline _____

Moral values _____

Medical and dental _____

Psychological and psychiatric care _____

Social activities _____

Extracurricular activities Recreational activities _____

Legal care _____

Financial involvement _____

Summer camp, travel and activities _____

Other (please list) _____

Custody Award

Do you believe the custody award was unfair? ☐ Yes ☐ No

Do you suspect that you were discriminated against in the child custody award because of your gender, race, class, culture, ethnicity or sexual orientation? ☐ Yes ☐ No

Do you suspect that you were discriminated against in the child custody award because of the relationship between any court personnel? ☐ Yes ☐ No If Yes, please explain:

Do you suspect that you were discriminated against in the child custody award because the judge and/or attorneys or any other court personnel? ☐ Yes ☐ No

Were you not represented by an attorney at any time in the proceedings? ☐ Yes ☐ No

Did your child(ren) have an attorney at any time in the proceedings? ☐ Yes ☐ No