

PARENT QUESTIONNAIRE & INFORMATION SHEET

FOR COURT USE ONLY	
CASE NO. _____	_____
JUDGE: _____	_____
P: _____	D: _____
DATE RECEIVED: _____	

A. PERSONAL: **New Address**

<i>name</i>		
<i>street address</i>		
<i>city</i>	<i>state</i>	<i>zip code</i>
<i>home phone</i>	<i>work phone</i>	
<i>Please list highest grade completed and/or any specific training you may have received:</i>		
<i>Name and address of current employer:</i>		
<i>Current work hours and days:</i>	<i>Starting date:</i>	
<i>List all other jobs held during the past 3 years, beginning with the most recent, including dates of employment:</i>		

<i>your attorney's name</i>	<i>phone</i>	<i>fax</i>
<i>business address</i>		
<i>city</i>	<i>state</i>	<i>zip code</i>

B. MARITAL HISTORY:

What have been the major problems in the marriage? _____

Were there any previous separations? Who initiated the separation? Who left the home? Have you filed for divorce before? If so, where? _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><i>no</i></td> <td style="padding: 2px;"><i>yes</i></td> </tr> <tr> <td style="padding: 2px;"><i>husband</i></td> <td style="padding: 2px;"><i>wife</i></td> </tr> <tr> <td style="padding: 2px;"><i>husband</i></td> <td style="padding: 2px;"><i>wife</i></td> </tr> <tr> <td style="padding: 2px;"><i>no</i></td> <td style="padding: 2px;"><i>yes</i></td> </tr> <tr> <td style="padding: 2px;"><i>date</i></td> <td style="padding: 2px;"><i>date</i></td> </tr> </table>	<i>no</i>	<i>yes</i>	<i>husband</i>	<i>wife</i>	<i>husband</i>	<i>wife</i>	<i>no</i>	<i>yes</i>	<i>date</i>	<i>date</i>
<i>no</i>	<i>yes</i>										
<i>husband</i>	<i>wife</i>										
<i>husband</i>	<i>wife</i>										
<i>no</i>	<i>yes</i>										
<i>date</i>	<i>date</i>										

C. CUSTODY:

Is there a Court Order for custody?
 Are you requesting Shared Parenting?
 Have you filed a Shared Parenting plan?
 Have you filed for custody?

no	yes
no	yes
no	yes
no	yes

What are your feelings with regard to your spouse having custody? _____

D. MEDIATION: ** please review the enclosed mediation brochure **

Parents are encouraged to work together to make the best possible parenting arrangement for their children. Mediation provides a structured, open discussion of many options, a means for the parents to retain control of the outcome of their divorce, and is generally quicker, more satisfying, and less expensive than litigation.

Are you interested in having the option to mediate with your spouse?

no	yes
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If you have questions about whether or not mediation would be appropriate for your case, please call 225-4191.

E. FINANCES and CHILD SUPPORT:

Are you on any form of government assistance?	no	yes	<i>If so, what kind?</i>	
Was bankruptcy filed during the marriage?	no	yes	<i>If so, who filed?</i>	
<i>Place & date of filing; case number; other relevant information:</i>				
Is there a court order for child support for children of this marriage?	no	yes	<i>If so, who pays the support:</i>	
Is child support being paid without a court order?	no	yes	<i>you</i>	<i>your spouse</i>
What is the amount per child, and per week or per month?				
Is this amount paid or received on a <u>regular</u> basis?			no	yes

F. HEALTH:	<i>Poor</i>	<i>Fair</i>	<i>Good</i>	<i>Excellent</i>	Are there any physical problems? Please describe:			
<i>you</i>								
<i>your spouse</i>								
Are you or your spouse currently under the care of a physician, psychiatrist, or psychologist?					<i>you:</i>	<i>no</i>	<i>yes</i>	<i>If so, please provide the following information:</i>
					<i>your spouse:</i>	<i>no</i>	<i>yes</i>	
<i>Their name</i>					<i>phone #</i>	<i>address</i>		
If you are currently on any kind of prescription drug, please list, and give the name of the doctor who prescribed the medication:								
Have you or your spouse ever been institutionalized for any reason?					<i>you:</i>	<i>no</i>	<i>yes</i>	<i>If so, please provide the following information:</i>
					<i>your spouse:</i>	<i>no</i>	<i>yes</i>	
<i>Doctor's name</i>					<i>phone #</i>	<i>Institution name and address</i>		
Do you drink alcohol?	<i>no</i>	<i>yes</i>	<i>If yes, how often?</i>					
Does your spouse?	<i>no</i>	<i>yes</i>	<i>If yes, how often?</i>					
Have you ever abused drugs?	<i>no</i>	<i>yes</i>	<i>If yes, please give full explanation:</i>					
Has your spouse ever abused drugs?	<i>no</i>	<i>yes</i>	<i>If yes, please give full explanation:</i>					

G. HOME IN WHICH YOU CURRENTLY RESIDE:

Type of dwelling:	Number of bedrooms:
<i>Names of other persons living in the home:</i>	<i>Relationship:</i>

H. CHILDREN of CURRENT MARRIAGE:

<i>name of child</i>	<i>sex</i>	<i>date of birth</i>	<i>residing with:</i>	<i>T if emancipated</i>

OTHER CHILDREN WHO RESIDE WITH YOU:

<i>name of child</i>	<i>sex</i>	<i>date of birth</i>	<i>residing with</i>

Do you have custody?

no	yes
no	yes

Are you requesting child support?

How much? _____

Describe the children's adjustment to the separation/divorce: _____

What are the babysitting/day care arrangements? _____

If you feel your child(ren) has/have any physical or emotional problems or school issues which must be considered in the divorce, please describe: _____

Have any other parties or your spouse made allegations of physical or sexual abuse against you in regard to the child(ren)? If so, please explain: _____

Do you have any reason to believe your spouse has been physically or sexually abusive toward the child(ren)? If so, please explain: _____

Have the children ever been abused or neglected?

<i>no</i>	<i>yes</i>
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Were the police, Children Services, or Juvenile Court ever contacted?

<i>no</i>	<i>yes</i>
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If so, what agency, and in which county? _____

Please list the names of the workers that you have been involved with at Children Services or Juvenile Court and describe the incident: _____
 _____.

Please describe any conflict areas in your parenting styles; such as: differences in child rearing philosophy, discipline, religion, communication, hygiene, etc.: _____
 _____.

I. VISITATION

Is there a court order for visitation at this time?	<i>no</i>	<i>yes</i>
Do you have visitation periods with the children on a regular basis?	<i>no</i>	<i>yes</i>
What amount of time do you spend with the children?		
What amount of time does your spouse spend with the children?		
Have you ever denied your spouse contact with the children?	<i>no</i>	<i>yes</i>
<i>If so, please explain:</i>		
Have you been denied contact with the children?	<i>no</i>	<i>yes</i>
<i>If so, please explain:</i>		

J. LEGAL MATTERS

Have either you or your spouse ever been convicted of a crime, been on probation, or had criminal charges against them (past or present)?	<i>you</i>	<i>no</i>	<i>yes</i>	<i>If so, please describe and list the charges, below:</i>
	<i>your spouse</i>	<i>no</i>	<i>yes</i>	
<div style="border: 1px solid black; height: 50px; width: 100%;"></div>				

Is there a Civil or Criminal Protection Order against:	<i>you?</i>	<i>no</i>	<i>yes</i>
	<i>your spouse?</i>	<i>no</i>	<i>yes</i>
<i>Has any form of violence or threat of violence ever occurred in your relationship with the other party?</i>			
<i>no</i>	<i>yes If so, was this ___ during the marriage; ___ after the separation ___ after the divorce; ___ within the past month? (Please check all that apply)</i>		
<i>Describe any injuries:</i>			
Are there any Domestic Violence Charges now pending against:	<i>you?</i>	<i>no</i>	<i>yes</i>
	<i>your spouse?</i>	<i>no</i>	<i>yes</i>
Are there any ___ Criminal Charges, or ___ Civil Cases pending against:	<i>you?</i>	<i>no</i>	<i>yes</i>
	<i>your spouse?</i>	<i>no</i>	<i>yes</i>
<i>If so, where:</i>	<i>Briefly describe:</i>		

K. ADDITIONAL REMARKS:

I hereby swear or affirm that the information I have stated herein is the truth to the best of my knowledge.

 Signature

 Date

Complete and return to: Montgomery County Domestic Relations Court
 Attn: Parenting Education Department
 301 W. Third Street, P.O. Box 972
 Dayton, Ohio 45422-4248