



# First Coast Family Solutions

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## INITIAL PARENT QUESTIONNAIRE

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

**Please read each of the following questions and answer them as completely and accurately as you can. We will go over these questions during the interview portions of the custody evaluation. If you need more room, just make a note and attach another page to the back for each section.**

Child(ren)'s Name: _____	DOB: _____
_____	DOB: _____
_____	DOB: _____
_____	DOB: _____
_____	DOB: _____
_____	DOB: _____

1. What is your understanding of the reasons(s) that the court ordered a custody evaluation in your case? Tell the story about why you and your child's other parent have ended up needing this custody evaluation.

2. What kinds of things have kept you and the other parent from reaching an agreement or settlement about the time sharing arrangements for your children? For example, it might be a difference in parenting philosophy or communication problems.

3. If you could make the decision on your own, what would you like the time sharing and parenting plan to be? Why do you feel that this is the best plan? Please describe in detail, including dates, time blocks, transfer arrangements and the like.

4. What do you think the other parent would like the time sharing and parenting plan to be?

5. Would you expect the custody and time sharing plan to change as your child(ren) get older? In what ways?

6. Have you considered joint legal or physical custody in your case? Why or why not?

7. What are the temporary custody and visitation arrangements presently? Please describe in detail, including transportation arrangements in place.

8. How are these temporary arrangements working for you?

9. How do you think the existing temporary arrangements are working for the child(ren)?

10. When did these custody arrangements begin?

11. How did these temporary custody arrangements come about?

12. What are your concerns about the other parent?

13. Do you have major concerns about the other parent in any of the following areas?  
Please provide examples of your concerns.

Substance Abuse?

Neglect of Children?

Physical Health?

Mental Health?

Depression?

Potential for Suicide?

Potential for Violence?

Emotional Abuse of Children?

Other?

14. What do you think are the other parent's concerns about you? Provide specific examples where you can.

15. Have you ever been involved in custody litigation before? When and Why?

16. When were you married or together? \_\_\_\_\_

When did you physically separate? \_\_\_\_\_

Is your separation final? \_\_\_\_\_ If so, when? \_\_\_\_\_

17. Have you re-married or are you cohabiting? \_\_\_\_\_

18. When did you re-marry or move in with your partner? \_\_\_\_\_

(If Cohabiting or Remarried) Does this person have children living in the home? How many and

what are their ages?

19. Are you planning to move away from the area in the future? When and Why?

20. If you are planning to move, what plans will you make so that the children remain in contact with the other parent, or if you are moving without the children, what are your plans to keep in contact with them?



7. What, if any, was your religious upbringing?
  
8. Has anyone in your family ever abused alcohol or drugs?
  
9. Has anyone in your family ever been arrested? Who and why?
  
  
  
  
  
  
  
  
  
  
10. Has anyone in your family experienced serious emotional problems? Who and why?
  
  
  
  
  
  
  
  
  
  
11. Has anyone in your family ever been accused of abuse of neglect of an adult or child? Who and why?
  
  
  
  
  
  
  
  
  
  
12. Please describe your educational history before the age of 18.  
What schools did you attend and when? If you changed schools (for example, had more than one school for elementary school), please explain why this was.
  
  
  
  
  
  
  
  
  
  
13. Did you enjoy elementary school, junior high and high school?  
Why or why not?

14. What were your grades during elementary, junior high and high school?
15. In what kinds of extra-curricular activities did you participate?
16. Describe your social life during school.
17. Did you graduate from high school? \_\_\_\_\_ When? \_\_\_\_\_ GPA? \_\_\_\_\_
18. Describe any post-high school training you have had, degrees obtained and dates received.

19. Describe your work history. List your employment beginning with the most recent, backward for the past ten years, or since you left high school. Please list **supervisor and contact telephone numbers** for jobs you have had in the past three years. Please explain your reasons for changing jobs. Continue on the back of this page.

A) Most Recent Job Title:  
Employment Dates:  
Duties:

Reasons for Leaving:  
Supervisor and Contact Number:

B) Next Most Recent Job Title:  
Employment Dates:  
Duties:

Reasons for Leaving:  
Supervisor and Contact Number:

C) Next Most Recent Job Title:  
Employment Dates:  
Duties:

Reasons for Leaving:  
Supervisor and Contact Number:

20. Have you ever been in the military? Dates of service? Discharge was honorable/dishonorable?
21. Have you ever been arrested?

Have you ever been convicted of a crime?

Please provide a comprehensive report of all arrests and convictions.

22. Do you have a religious affiliation? If so, please describe your church attendance.

23. Have you ever been investigated by a social service agency (DCFS)?

When and why? Please provide all necessary releases for DCFS.

24. How much alcohol do you drink? How frequently?

25. Do you use or have you ever experimented with illicit drugs, such as marijuana or cocaine?

26. Do you have any health problems? Please describe.

27. Have you ever had a head injury?

28. Are you under a doctor's care for anything? If so, please list your physician's name, address and telephone number.

29. Are you taking any prescribed medications? What are they?

30. Have you ever seen a counselor or psychotherapist?

If so, **list the name, address and telephone number of the counselor**, the approximate date when you received therapy, and why.

31. Have the children ever received counseling or psychotherapy, either from the school or privately? If so, **list the name, address and telephone number of all counselors**, the approximate dates of treatment and why the children were seen.

32. List the children's pediatrician and dentist, their names, telephone numbers and addresses. When were their last appointments with each?

## **FAMILY HISTORY**

1. Had you been married before this most recent marriage/relationship? \_\_\_\_\_  
If so, please describe that relationship or relationships, including dates of marriage, names of ex-spouses and reasons for separation. Also include a list of any children from the previous marriage(s) and the location and /or status of those children.
  
  
  
  
  
  
  
  
  
  
2. Where did you meet your most recent marital partner? What attracted you about this person?  
How did your relationship develop?
  
  
  
  
  
  
  
  
  
  
3. How long did you date before cohabiting or getting married?
  
  
  
  
  
  
  
  
  
  
4. How did you decide to get married/cohabitate/produce a child? Was one person more interested in pursuing marriage than another?
  
  
  
  
  
  
  
  
  
  
5. How many physical moves were there during the marriage and after the marital separation? List approximate dates of residences, as well as former addresses.
  
  
  
  
  
  
  
  
  
  
6. What kinds of financial stresses did you experience in the marriage?

7. How were your finances managed?

Who paid bills?

How were major financial decisions made?

8. What was the family's total income at the time of separation?

Father's monthly income at that time:

Mother's monthly income at that time:

9. What is your total monthly income now, and from what sources (e.g. child support, alimony, job, help from extended family, etc.)

10. Describe your residence – do you own your home? Are you renting? Are you living with friends or family, etc.? Where do the children sleep when they are with you?

11. What was the happiest time in your relationship?

12. What kinds of things did you disagree about during the relationship?

13. How were those disagreements handled and resolved?

14. How far would the disagreements escalate? How would the disagreements end?

15. Was there:

Pushing or Shoving? \_\_\_\_\_ Throwing things? \_\_\_\_\_

Slapping? \_\_\_\_\_ Punching? \_\_\_\_\_ Other?

16. Were the police ever called or involved in your domestic disputes? If so, list dates and results of that police intervention. You will also need to provide copies of all police reports.

17. Were there any witnesses to violent domestic disputes, including the children?

18. Did anyone in the family have any major medical problems during the relationship?

19. Were there difficulties with extra-marital affairs during the relationship?

20. Were there disputes around the children, such as discipline, rules, and the like?

21. What are the factors that brought the relationship to an end?
22. What things did YOU do that made relationship matters more difficult?
23. What things have you done or are you doing currently during this divorce/custody action, than has increased the tension between you and your former spouse?
24. What are the things that your former spouse does which makes communication and resolution of the divorce and custody matters more difficult?
25. Are you currently dating? If so, describe whom you are dating, the nature of the relationship, the amount of contact and the children's relationship with that person.
26. Are you remarried or planning to remarry? If so, please describe the development of that relationship and history. Please describe the relationship between your new spouse and the children.



5. Which parent provided the most direct care (bathing, feeding, getting up at night, etc.) during the first three years of the child's life? Please describe your involvement in these matters.

6. How would the other parent answer the above question?

7. Does the child or children have any history of serious physical illness? Hospitalization? Is any child under the regular care of a physician for any illness?

Children's MD \_\_\_\_\_ Telephone number: \_\_\_\_\_

Children's Dentist: \_\_\_\_\_ Telephone number: \_\_\_\_\_

8. Who takes the child to the physician and dentist?

9. When was the last time each child was seen by the physician and dentist?

10. Who maintains health insurance on the children? Has this insurance ever lapsed?  
Does each parent have access to the children's health insurance information?

12. What are each child's extra curricular activities? Please list the schedule of these activities as well as names and contact telephone numbers for coaches, piano teachers and the like.

13. Who takes the children to their extra curricular activities? Who pays for the extra-curricular activities? How is the choice of a child's extra-curricular activities decided? Have extra-curricular activities ever interfered with the other's parent's time with the children? In what way?

14. List the child's school, and teachers for the past two years. **Please provide complete contact information (address and telephone numbers) for these teachers.**

15. What are each child's best and worst academic subjects?

16. What kinds of parent involvement in the school has each parent had? For example, is the parent a member of the PTA? Does each parent attend Parent-Teacher Conferences? Has the parent ever volunteered for a field trip or in the child's classroom?

17. Do the teachers know about the current custody dispute? What have you told them?

18. Who is your child's best friend or friends?

19. Describe your child's play patterns with these friends. Is your child bullied? \_\_\_\_\_  
Is your child bossy? \_\_\_\_\_ Submissive? \_\_\_\_\_ A "Ringleader"? \_\_\_\_\_ A follower? \_\_\_\_\_

20. If siblings are present, describe the intersibling relationships between the children. Who is closest to whom? Who fights most with whom? Who is jealous of whom?

21. What is the typical family routine on a weekday or school day when you are with the children? Begin with the time the children awaken until they go to sleep.

22. Describe the typical routine when your child is with you on a weekend or holiday.

23. What are your basic family rules? Are there rules for watching TV? Eating? Playing with friends?

24. Do the children have regular chores or duties? What are they? Do they have chores or duties at the home of the other parent?

25. How do you get the children to do homework or chores?

26. Do you use rewards for good behavior? In what way? When and how?

27. What situations arise with each child that would require you to use discipline?

28. Have there been any recurring discipline problems? Please describe them.

29. What kinds of discipline do you use?

30. What parenting and/or discipline techniques seem to work best with each child? What kind of discipline technique “backfires” with each child?

31. Do you and the other parent share similar philosophies about parenting style and discipline? If not, what are the differences? Do you see any differences as problematic for your child?

32. Please describe how the children were disciplined during the marriage and which parent did most of the discipline.

33. Does the child come to you with problems? What kind of things do you talk about with your child?

34. How did each child react to the divorce or separation? What have you noticed?

35. What have you told each child about the divorce?

36. What have you told each child about the custody evaluation?

37. Describe the relationship between each child and the other parent? Are they emotionally close?  
Does the child miss the parent when they are not present?

38. What do you do when the child asks to see the other parent, not in accordance with the set time sharing or visitation plan? How often does this occur? Do you notice a pattern to these kinds of requests (e.g. when the child has broken a rule, is tired or the like)?

39. What do you do if the child asks to telephone the other parent? How often does this occur?

40. Has any child ever refused to go with the other parent? How often has this occurred? What would you do if this occurred?

41. Does your child seem to miss the other parent when he or she is not present?

42. What kinds of things are you doing to encourage your child's relationship with the other parent?

43. What are your best qualities as a parent?

44. What are your weaknesses as a parent?

45. What are the other parent's best qualities as a parent?

46. What are the other parent's weaknesses as a parent?

47. Are there stepparents involved in this matter? Describe the quality of each child's relationship with each stepparent. Describe your relationship with the significant other of your spouse.

45. What is the appropriate role for a stepparent to take? What kinds of behaviors would you expect from a stepparent?

46. Who does the transportation for the time-sharing and visitation plan? (Who drives?)

47. How was this decision made?

48. Have you considered moving closer or farther away from the other parent? Why or why not?

48. Please take this opportunity to list any questions or concerns that you have which have not been covered thus far in this questionnaire. Remember, we will be discussing your responses to these questions during the interview portion of the evaluation.

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Parent signature