

First Coast Family Solutions  
**ASPECT TEST FOR CUSTODY EVALUATIONS**

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1. Psychiatric Treatment, both current and historical for the past 3 years:
  
  
  
  
  
  
  
  
  
  
2. Organizations you belong to:
  
  
  
  
  
  
  
  
  
  
3. Hobbies, Skills, Interests:
  
  
  
  
  
  
  
  
  
  
4. When were you married, divorced, widowed separated?:
  
  
  
  
  
  
  
  
  
  
5. Have you ever served in the military? If, yes, where did you serve?

6. Has a close friend or family member died in the past two years?
  
7. Please state your highest completed level of education:
  
  
  
  
  
  
  
  
  
  
8. Is your work satisfying? If not, why?
  
  
  
  
  
  
  
  
  
  
9. What do you remember about the first time you used alcohol? Have you ever been treated for alcohol or drug abuse?
  
  
  
  
  
  
  
  
  
  
10. Where were you born and raised?
  
  
  
  
  
  
  
  
  
  
11. Education and occupation of Parents:

12. Parents divorced?

13. If either of your parents are deceased, how old were you at the time of death?:

14. What is your current age? Ages of brothers and sisters?:

15. While you were growing up, did you have any problems with any of the following? If yes please give details, including arrest dates if any.

Drugs:

Alcohol:

Sex Crimes:

Domestic Violence:

16. Have you ever been sexually assaulted?

17. Have you ever been in trouble with the law?

18. Religious Affiliation (optional):

19. Major causes of stress in your life at this time?:

20. If currently in therapy, what are your goals:

21. List any current medical problems:

22.If you are currently taking any medications, please identify them and state the reason for taking each one:

23.Have you been previously married?

24.Previous marriage information:

25.Why are you seeking custody or physical placement?:

26.What would be the ideal custody and visitation arrangement for your family?:

27. How would it affect you if the other parent received custody or primary placement?

28. Joint custody involves shared decisions about each of your children's education, religious upbringing, medical treatment and related issues. What would be the advantages and disadvantages of a joint custody arrangement for your family?

29. In question 26, you identified the ideal custody arrangement. What elements of your ideal arrangement would you be willing to negotiate?

30. How is each of your children performing in school?

31. Identify each child's interests, fears, skills and problem areas:

32. For each problem area, describe the solution that you feel would be most effective:

33. What are your strengths as a parent?

34. What are your weaknesses as a parent?

35. What are the other parent's greatest strengths and weaknesses?

36. From which sources do you draw information concerning child rearing?

37. If you are having difficulty with your child or children, to whom do you talk?

38. What are your current child care arrangements?

39. What are your future child care arrangements?

40. What would be the living arrangements of your child or children if you received placement?

41. What comments or concerns does the other parent have about the way you handle your children?

42. Did the mother experience postpartum depression following the birth of one or more of the children?



43. For each of your children, specify when he or she learned to walk and talk, when the child was toilet trained, any unusual childhood illnesses, and any eating or sleeping problems:

44. Identify the special needs of your children at this time:

45. What are the specific needs that each of your children will have next year? In 3 years? In 5 years?

46. Who provided your children with sex education?

47. Who taught your children about oral hygiene?

48. Who taught your children about general hygiene?

49. How, do you feel, will the divorce affect your children?

50. What has each of your children been told about the divorce?

51. What has each of your children been told about living arrangements?

52. What, do you think, are the wishes of your children regarding custody placement?

53. What is the bedtime routine of your children?

54. List the ages and sexes of the friends and relatives with whom your children come into regular contact:

55. How often do you allow your children to have friends in the home?

56. All children misbehave from time to time. For each of your children, list a misbehavior and how you handled it:

57. How often do you find you have to spank your children?

58. List the name of each teacher and each child's grade level, favorite subject, and most difficult subject:

59. Over the past year, what school events have you attended?

60. How often does each child need help with his or her homework?

61. How does each child know you love him or her?

62. If the children are currently living with you, how often does the other parent visit?

63. If your children are not currently living with you, how often do you visit?