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--CONFIDENTIAL CUSTODY QUESTIONNAIRE--

It is important to complete this questionnaire as fully and accurately as possible. **All of this information is requested for a reason.** You will be paying for the time we spend on your case. The more complete you can make this form, the more money you will save. It is fine to leave an answer blank if you do not know the answer or if something does not apply to you. You only need to fill out one confidential custody questionnaire between the two of you.

1. **What is your full name?**

First: _____

Middle: _____

Last: _____

Maiden: _____

Former married names:

What is the other parent's full name?

First: _____

Middle: _____

Last: _____

Maiden: _____

Former married names:

2. **Please list your contact information:**

Street: _____

City: _____

State: _____

Zip: _____

Cell Phone: _____

Email: _____

Please list the other parent's information:

Street: _____

City: _____

State: _____

Zip: _____

Cell Phone: _____

Email: _____

3. **Please give the following vital statistics about yourself:**

Soc. Sec. No.: _____

Driver's License State: _____

Driver's License No.: _____

Age and Date of Birth: _____

City and State of Birth: _____

Please give the following vital statistics about the other parent:

Soc. Sec. No.: _____

Driver's License State: _____

Driver's License No.: _____

Age and Date of Birth: _____

City and State of Birth: _____

How long in Oregon: _____

How long in Oregon: _____

Race: _____

Race: _____

Level of Education Completed: _____

Level of Education Completed: _____

4. **Your employment information:**

Stay at home parent Unemployed

The other parent's employment information:

Stay at home parent Unemployed

Employer: _____

Employer: _____

Street: _____

Street: _____

City: _____

City: _____

State: _____

State: _____

Zip: _____

Zip: _____

Phone No.: _____

Phone No.: _____

Email: _____

Email: _____

5. **Children:**

Please give full name, date of birth and sex of each child, and indicate whether the child was born of this relationship or of a former relationship of either you or the other parent.

First	Middle	Last	SSN	Sex	Birthday	Age
_____	_____	_____	_____	M / F	_____	_____
	Ours <input type="checkbox"/>	Mine <input type="checkbox"/>	Other's <input type="checkbox"/>			
_____	_____	_____	_____	M / F	_____	_____
	Ours <input type="checkbox"/>	Mine <input type="checkbox"/>	Other's <input type="checkbox"/>			
_____	_____	_____	_____	M / F	_____	_____
	Ours <input type="checkbox"/>	Mine <input type="checkbox"/>	Other's <input type="checkbox"/>			
_____	_____	_____	_____	M / F	_____	_____
	Ours <input type="checkbox"/>	Mine <input type="checkbox"/>	Other's <input type="checkbox"/>			

Are you or is the other parent now pregnant? Yes _____ No _____

6. **Which counties has the child(ren) lived in now and in the past?**

Has the child(ren) lived in the same county for the past 5 years? Yes _____ No _____

If yes, which County? _____

If no, please list the dates and counties that the child(ren) has lived in for the past 5 years:

Dates	County, State	Caretaker(s)

7. **Answer only if you already have a custody judgment and are seeking a modification:**

What is the date of your custody judgment? _____

In what county did your original custody case occur? _____

Have any orders been entered modifying the original judgment? Yes _____ No _____

*Please bring a copy of your most recent judgment

9. **Are you or your children currently receiving government benefits, including being on the Oregon Health Plan? If so, please list all benefits received:**

8. **How were you referred to this office?**

Please note that the firm has not accepted your case until a retainer agreement has been signed and a payment arrangement has been made. You can obtain a retainer agreement from the firm's website at www.mediatingattorney.com. It is helpful to us to receive these forms before your first meeting. These forms can be emailed to forrest@mediatingattorney.com or faxed to 866-399-3093. We look forward to working with you.