



**SAN LUIS OBISPO SUPERIOR COURT
FAMILY COURT SERVICES (805) 226-3251**

File # _____

CHILD INTERVIEW PARENT QUESTIONNAIRE

Name: _____
Last First Middle (Aka's)

Birth Date: _____ Age: _____ Place of Birth: _____

Address: _____
Street City/State Zip Code

Home Phone: () _____ Work Phone: () _____

Cell Phone/Pager: _____ e-mail: _____

Do you have an attorney? Yes No If Yes, Who?

Name Phone

Current Employer: _____ Position: _____
Title Dates

Minor Children to be Interviewed

Name Birth date Age Grade/School Current Parenting Plan

- 1.
- 2.
- 3.

Other Minor Children Living in the Household

Name Birth date Age Grade Relationship to each child

- 1.
- 2.

List All Adults Currently Residing in Your Home Other Than Yourself

Name/Relationship Birth date

- 1.
- 2.

PERSONAL HISTORY

Current Spouse or Significant Other: _____
Name Date of Birth

1. How long have you known the other parent in this case? _____
When did your relationship begin? _____
Were you married? Yes No When did you separate? _____

2. Have any of the children seen a counselor/therapist/religious advisor during the past two years? Yes No If yes, Who: _____

3. What are you biggest concerns and conflicts about the other parent in this case?

4. Do you have any concerns about the children's physical or emotional safety while they are in your, or the other parent's household?

5. Have any of your children had contact with Child Protective Services or the Juvenile Court? Yes No If so, describe what happened, and indicate what, if any, services/treatment the children received:

6. Name of school your child attends: _____
Telephone # _____ Teacher name _____

7. What do you think would be the ideal custody and parenting plan for your child/ren?

8. Is there anything more that you want the evaluator to know?

Your Signature

Date