PARENT QUESTIONNAIRE

Please answer all questions <u>briefly</u>. Most questions will require only a few words to answers or "N/A" for "not applicable." Others require more description or explanation, but please keep responses brief--<u>do</u> not exceed a ½ page for any question. You will have the opportunity to elaborate in interviews.

Please type your answers directly into this form and email it back to: <u>ivanh@coloradofamilycenter.net</u>

Providing your answers in bold print or in blue ink would be greatly appreciated.	
YOUR	Name: Today's Date:
1.	List where (city, state) you resided during the marriage (include approximate dates)
2.	List the approximate dates of any separations during the marriage/relationship
3.	Date of Temporary Orders
4. 5.	Date of Final Orders (if applicable) Where have you and the other parent resided since the separation? Describe.
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6.	Are there presently or has there been any Protective Orders in place? Describe.
7.	Have there been any allegations or charges of Domestic Violence or Child Abuse/Neglect? Explain.
8.	Do you consider yourself to have been abused by the other parent? If so, please describe those things that you consider to abusive.
	How far away (in miles and driving time) does the other parent reside from you? Does either parent intend to relocate out of town? Where to? For what reason?
11.	List any psychological evaluations or family evaluations that have been conducted in this case including what the evaluation was for and who performed it.
12.	What are the key issues you wished have addressed in this evaluation and what are the outcomes you hope for?

- 13. What are your biggest concerns about the other parent?
- 14. What are your biggest concerns about the well-being of your children?
- 15. Are you currently in a relationship? If so, list the name of the individual.
- 16. Describe your present living arrangements, including the names and relationships of everyone who lives with you.

PARENTING

- 1. When and how do you typically spend time with your child(ren)?
- 2. What are your methods of discipline?
- 3. Describe your strengths and weaknesses as a parent.
- 4. Describe the other parent's strengths and weaknesses as a parent.
- 5. Describe any concerns you have about step-parents or other adults who are a part of your child(ren)'s life?
- 6. Do your children do homework in your home? If yes, describe homework routines.
- 7. How long does it take you to drive to your children's school?
- 8. How long does it take you to drive to the other parent's home?
- 9. How are telephone calls between the children and the other parent handled in your home?
- 10. Have you ever denied the children contact with the other parent? Explain.
- 11. Has your child ever resisted spending time with other parent? Describe.
- 12. What happens if the child forgets something at the other parent's home?
- 13. Which parent chooses the health care professionals for your children?
- 14. Which parent schedules and takes the children to routine dental and doctor appointments?
- 15. Which parent schedules and takes the children to activities, play dates, etc?
- 16. Which parent selects and enrolls the children in daycare and/or school?
- 17. Which parent takes the children to daycare/school?
- 18. Who attends parent-teacher conferences?
- 19. How are religious matters handled for your children?

HEALTH

- Describe your overall health and any current medical conditions, including mental health conditions or addictive diseases.
- 2. List any medications you take and for what conditions.
- 3. List any significant injuries, illnesses, hospitalizations.
- 4. Have you experienced any traumas or victimization? Describe.
- 5. Have you experienced any head injuries? Describe.
- 6. Are you under the care of a health professional currently? If yes, who and for what condition/purpose?
- 7. Describe any issues you have or have had with anger, alcohol, substances, pornography, relationships, or significant moral lapses.

LEGAL HISTORY

- 1. Have you ever been arrested? Explain.
- 2. Describe any criminal convictions, including plea agreements.
- 3. Has your driver's license ever been revoked, suspended, or canceled? Please explain.
- 4. Have you had any lawsuits brought against you? Explain.

LIFESTYLE

- 1. What other significant responsibilities do you have in addition to work, home, parenting (e.g., civic duties, volunteer work, elder care, etc.)?
- 2. Please describe any social or recreational activities you engage in.
- 3. Please describe how you manage stress.
- 4. Do you use tobacco? Describe.
- 5. Do you drink? Describe drinking habits.
- 6. Do you use recreational drugs? Describe.
- 7. Are you planning to move? Where and when?

CO-PARENT RELATIONSHIP

- 1. Describe how you and the other parent communicate with each other.
- 2. Do you and the other parent have a particular way that you resolve differences? Please describe.
- 3. Do you and the other parent argue, and if so, what happens when you and the other parent argue? Describe what each of you does when you get angry.
- 4. Can you tell when the other parent is about to get angry or an argument is about to begin? If so, please describe.

- 5. Do you and the other parent have a way that resolves fights, and if so, how?
- 6. Are there "trigger event" that trigger fights or disagreements between you and the other parent, and if so, what are they?
- 7. Do fights between the two of you ever "go wrong" and if so, what happens?
- 8. Do you and the other parent get into power struggles? If so, over what?
- 9. How confident are you that you and the other parent will be able to be able to peacefully and effectively co-parent after these legal proceedings are concluded? Please explain.