

FAMILY LAW/ DIVORCE QUESTIONNAIRE

This questionnaire is confidential and personal. **It is important** that you answer **ALL QUESTIONS** fully concerning all matters so I may provide you the best representation. If any question does not apply to you, write **NOT APPLICABLE** or **N/A**. **IT IS ESSENTIAL** that you notify me concerning any change of address, employment and salary change for both you and your spouse.

APPLICANT'S NAME: _____

I. JURISDICTION:

Have you lived in the State of Texas for the past six (6) months? _____ **Yes** _____ **No**

In what County do you reside? _____

How long have you lived in the above County? _____

Does your spouse live in Texas? _____ **Yes** _____ **No**

In what County does your spouse reside? _____

How long has he/she resided in that County? _____

Have you been married before? _____ **Yes** _____ **No** How many times? _____

How did marriage(s) end? _____ death _____
divorce/annulment

II. MARRIAGE:

Date of this marriage: _____ Date of Separation: _____

City & State of Marriage: _____

Is this a Common-Law Marriage: _____ **Yes** _____ **No**

If yes, when did you first begin living together? _____

Have you or your spouse ever filed for divorce to dissolve your present marriage? _____ **Yes**
_____ **No**

If yes, when? _____ Where? (County) _____

Name of Attorney who filed the divorce: _____

Is this divorce still pending in court? _____ **Yes** _____ **No**

Have you had marriage counseling? _____ **Yes** _____ **No**

State in your own words what your marital difficulties are: _____

Is there any possibility you and your spouse may reconcile? _____ **Yes** _____ **No**

Do you or your spouse want your former name restored? ____ **Yes** _____ **No**.

If **Yes**, list the full name as you would like to have it restored. _____

Do you believe your spouse will sign a Waiver? _____ **Yes** _____ **No**. (A Waiver is a notarized document in which your spouse waives service of citation, notice of final hearing, and certain other rights).

III. APPLICANT (Answer the following questions as they apply to **YOU**)

Full **Legal** Name: _____

Maiden Name (if female): _____

Social Security #: _____ Driver's License #: _____ State: _____

Current Home Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

Home Phone # _____ Cell Phone # _____

Fax # _____ E-mail Address: _____

Is this the residence where you have been living with your spouse? _____ **Yes** _____ **No.**

Birth Date: _____ Birth City _____ State _____ Race _____

Your Employer: _____

Business Address: _____

City: _____ State: _____ Zip: _____ Business Ph. # _____

Salary (**before taxes**): \$ _____ Take Home Pay: \$ _____

What hours do you work? _____ How often are you paid? _____

Length of Employment: _____ Job Description/Title: _____

Other Sources of Income? _____ **Yes** _____ **No** Amount? \$ _____ Per: _____

Fill out the following information on two persons who are willing to get a message to you and who may always know where you are:

<u>Name of Person</u>	<u>Relationship</u>	<u>Address</u>	<u>Phone</u>
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1. _____

2. _____

IV. SPOUSE (Answer the following questions as they apply to **YOUR SPOUSE**)

We must have an accurate full name and address of your spouse so the deputy or constable can personally hand the divorce papers to your spouse.

Full **Legal** Name: _____

Maiden Name (if female): _____

SS #: _____ Driver's License #: _____ State: _____

Present Home Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____ Ph. # _____

Is this the residence where you have been living with your spouse? _____ **Yes** _____ **No.**

With whom is your spouse living? _____ Parent _____ Boyfriend/Girlfriend _____ Friends

Birth Date: _____ Birth Place: City _____ State _____ Race _____

Your Spouse's Employer: _____

Business Address: _____

City: _____ State: _____ Zip: _____ Business Ph. # _____

Salary (**before taxes**): \$ _____ Take Home Pay: \$ _____

What hours does your Spouse work? _____ How often is your Spouse paid? _____

Length of Employment: _____ Job Description/Title: _____

Other Sources of Income? _____ **Yes** _____ **No** Amount? \$ _____ Per: _____

V. CHILDREN

Are you or your spouse pregnant? Yes No. Give full legal name of non-spousal biological parent: _____

Has Paternity been established? Yes No

List every child under eighteen (18) born **to you and your spouse** whether they were born before or during this marriage. Give the name of each child as it appears on the child's birth certificate (**first, middle, & last names**)

FULL LEGAL NAME	SE X	PLACE OF BIRTH	DATE OF BIRTH	SS#	DL#	WITH WHICH PARENT DOES CHILD LIVE?
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Can you provide a birth certificate for each child? Yes No
 Are all the children living with you? Yes No. If No, state which children are not and with whom are they living.

<u>FULL NAMES</u>	<u>PERSON WITH WHOM THE CHILD IS LIVING</u>	<u>ADDRESS</u>
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Do you want custody of your children? Yes No. If Yes, complete the information below on that child(ren):

<u>FULL NAME</u>	<u>SE</u> <u>X</u>	<u>BIRTH DATE</u>	<u>PLACE OF BIRTH</u>	<u>S.S.#</u>
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List the name and address of the non-spouse parent, if applicable.

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Ph.: _____

Do you have any child with a physical or mental handicap (such as epilepsy, TB, hearing loss, vision loss, paralysis, etc)? _____ **Yes** _____ **No.** If **Yes**, state the child(ren)'s name(s):

Is there any reason that you believe your spouse's visitation with the child(ren) should be limited or supervised?

_____ **Yes** _____ **No.** If **Yes**, state reason(s): _____

VI. ABUSE

Has your spouse ever been violent or abusive toward you? ____ **Yes** ____ **No**;
to your child(ren)? ____ **Yes** ____ **No**. If **Yes**, give brief details: **Date** of Violence: _____
Brief Description: _____

Has a court ever entered a Protective Order against your spouse? ____ **Yes** ____ **No**
If **Yes**, give date of the order: _____

Has a court ever entered a Protective Order against you? ____ **Yes** ____ **No**
If **Yes**, give date of the order: _____

Do your (child(ren) own any property in their own name(s)? (For example, property through inheritance, large gifts, etc.)? **Yes** __ **No**.

I HAVE READ THE FOREGOING AND SWEAR OR AFFIRM THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Your Signature

Date

LIST ANY ADDITIONAL INFORMATION HERE:

Who referred you to me? _____

Do you have a Will? _ **Yes** ____ **No**