

Client Name: \_\_\_\_\_

## **CUSTODY WORKSHEET**

Please fill out this questionnaire and return it as soon as possible. It is important that you answer each question fully. It is imperative that you be candid!

You should answer all questions relevant to your case. If a question does not apply to your particular situation, please indicate by marking the question "N/A." If the answer to any question requires more space than has been provided on the form, please complete your answer on a separate sheet: Refer to the question number to which your answer applies, and attach your answer to this questionnaire.

Your responses to these questions will help to organize your case and will save you money on attorney's fees in trying to gather and assemble information after the case is in progress. Since your answers are being made to an attorney, you are assured of confidentiality and are protected by the attorney-client privilege.

### **NOTICE OF CONFIDENTIALITY**

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY-CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF EVIDENCE. HOWEVER, IF A PROFESSIONAL, INCLUDING AN ATTORNEY OR AN EMPLOYEE OF AN ATTORNEY, HAS CAUSE TO BELIEVE THAT A CHILD HAS BEEN ABUSED OR NEGLECTED OR MAY BE ABUSED OR NEGLECTED OR THAT A CHILD IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE, THE PROFESSIONAL SHALL MAKE A REPORT NOT LATER THAN THE FORTY-EIGHTH HOUR AFTER THE HOUR THE PROFESSIONAL FIRST SUSPECTS THAT THE CHILD HAS BEEN OR MAY BE ABUSED OR NEGLECTED OR IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE. THE REPORT SHALL BE MADE TO THE APPROPRIATE AGENCY.

THE CONTENTS OF THIS DOCUMENT CONSTITUTE ATTORNEY WORK PRODUCT.

THE CONTENTS OF THIS DOCUMENT ARE CONFIDENTIAL AND ARE NOT TO BE DISCLOSED TO THIRD PERSONS OTHER THAN THOSE TO WHOM DISCLOSURE IS MADE IN FURTHERANCE OF THE RENDITION OF PROFESSIONAL LEGAL SERVICES.

**Client Information**

Your Name:	
Current Residence Address: (Please include, City, State, Zip, and County)	_____ _____ _____
Home Phone Number:	
Cell Phone/ Pager Number	
Work Number:	
Can you speak at work?	YES                      NO
Employer's Name:	
Employer's Address:	
Length of Employment:	
Position:	
Monthly Salary:	
Birth date :	
Birth place:	
Social Security Number:	
Driver's License Number:	
Spouse Name:	
How long have you been married?	
Name and number of someone we can contact is we are not able to reach you:	Name: _____ Phone Number: _____
Opposing Party:	
Current Residence Address:	
Home Phone Number:	
Work Number:	
Employer's Name:	

Employer's Address:	
Length of Employment:	
Position:	
Monthly Salary:	
Birth date :	
Birth place:	
Social Security Number:	
Driver's License Number:	

**Pending Proceedings, Other Attorneys, and What Brought You to This Office:**

1. Are there any court proceedings pending on this matter? \_\_\_\_\_

2. If so please name the:

County and Judge	
Court and Cause Number	
Date of Filing	
Status of case:	

3. Have you consulted or retained any other attorneys on this matter before coming to this office?

\_\_\_\_\_

4. If so, state who and when: \_\_\_\_\_

5. Did your spouse or your ex-spouse have any other attorney? \_\_\_\_\_

6. If so, who? \_\_\_\_\_

7. Who referred you to this office? \_\_\_\_\_

**Children:**

8. If you want primary custody of the children, please state in fifty words or less why you think you should have primary custody.

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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9. With whom do the children currently live? \_\_\_\_\_

10. Period of time in which this living arrangement has been in effect:  
\_\_\_\_\_

11. Names and ages of children party to this suit:

Child's Name:	
Sex:	MALE                  FEMALE
Birth date / age:	
Birth place:	
Social Security Number:	
Driver's License Number	
Currently Resides With:	
Child's Name:	
Sex:	MALE                  FEMALE
Birth date / age:	
Birth place:	
Social Security Number:	
Driver's License Number	
Currently Resides With:	

Child's Name:	
Sex:	MALE                  FEMALE
Birth date / age:	
Birth place:	
Social Security Number:	
Driver's License Number	

**Attorney/Client-Privileged Information**

Currently Resides With:	
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Child's Name:	MALE	FEMALE
Sex:		
Birth place:		
Social Security Number:		
Driver's License Number		
Currently Resides With:		

12. Names and ages of other children outside of this suit:

Child's Name:	
Who's child is this?:	
Sex:	MALE FEMALE
Birth date / age:	
Currently Resides With:	

Child's Name:	
Who's child is this?:	
Sex:	MALE FEMALE
Birth date / age:	
Currently Resides With:	

Child's Name:	
Who's child is this?:	
Sex:	MALE FEMALE
Birth date / age:	

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Currently Resides With:	
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Child's Name:	
Who's child is this?:	
Sex:	MALE                  FEMALE
Birth date / age:	
Currently Resides With:	

**13. Names and addresses of schools children attend, dates attended, and name of teacher or principal there who is familiar with child:**

Child:	
Name of School:	
Address:	
Dates attended:	
Grade:	
Teacher/Principal:	
What kind of school is this:	Daycare    Public School    Private School    Religious School

Child:	
Name of School:	
Address:	
Dates attended:	
Grade:	
Teacher/Principal:	
What kind of school is this:	Daycare    Public School    Private School    Religious School

Child:	
Name of School:	

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Address:	
Dates attended:	
Grade:	
Teacher/Principal:	
What kind of school is this:	Daycare    Public School    Private School    Religious School

**Care of Children:**

abilities listed below,

describe the degree to which the responsibilities have been shared:

14	Who helps the children get dressed in the morning?	
15	Who bathes the children and grooms them?	
16	Are any of the children nursing?	
17	Who takes care of the children during the day?	
18	Who arranges for getting children together with playmates?	
19	Who puts the children to bed at night?	
20	Who prepares meals?	
21	Who arranges for medical and dental care and takes the children to the doctor?	
22	Who takes the children to school?	
23	Who picks the children up from school?	
24	Who shops for the children's clothes?	
25	Who transports the children to extracurricular activities?	

26. Do you or your spouse or your ex-spouse participate in recreational or educational activities with the children?

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27. Describe the nature of the activities and how often you and your spouse or your ex-spouse participate in them:

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28	Do the children receive religious training?	
29	If so from who?	
30	Who arranges the children's birthday parties?	
31	Who helps the children with their homework?	
32	Who attends parent-teacher conferences?	
	Are the children more likely to turn to you or to your spouse or your ex-spouse when they have problems	
	Do you feel the children are closer to you or to your spouse or your ex-spouse?	
	Are the children in day care or with a sitter?	
	If so, how many hours per week?	
	Give the name and number of any baby sitter or daycare:	_____ _____
	Who arranges for the day care or sitter?	
	Who cares for the children when they are ill?	
	Who disciplines the children	
	By what method?	
	Has the division of responsibility for child care changed over the years?	

43. If so, describe: \_\_\_\_\_

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**Time Available to Spend with the Children and Plans for Their Future Care:**

	What are your working hours?	
	What time do you leave home?	
	When do you return?	
	Do you have flexible working hours?	
	Does your work require travel?	
	If so, describe the frequency, time involved, and distances:	<hr/> <hr/> <hr/>
	Is your work schedule likely to change in the future?	
	What are your plans for child care?	
	Describe your housing arrangements, including number of bedrooms:	<hr/> <hr/>
	What are your spouse's or your ex's working hours?	
	What time does your spouse or your ex's leave home?	
	When does your spouse or your ex's return?	
	Does your spouse or your ex-s work require travel?	
	If so, describe the frequency, time involved, and distances:	<hr/> <hr/> <hr/>
	Is your spouse's or your ex's work schedule likely to change in the future?	<hr/> <hr/>
	What are your spouse's or your ex's plans for child care?	
	Describe your spouse's or your ex's housing arrangements, including number of bedrooms:	

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**Special Needs of the Children:**

62. Do the children have any special or unusual educational or health-care needs?

\_\_\_\_\_

63. If so, describe them: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

64. Who has worked to meet those needs? \_\_\_\_\_

65. Are you or your spouse or your ex-spouse better able to meet those needs?

\_\_\_\_\_

66. Has the children's academic performance changed in the last few years or months?

\_\_\_\_\_

67. If so, what is the reason for the change? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Interference with Other Parent's Relationship with Children:**

68. Will it be alleged that you or your spouse or your ex-spouse has interfered with the children's relationship with the other parent or spoken badly about the other parent to the children?

\_\_\_\_\_

69. If so, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

70. Will it be alleged that you or your spouse or your ex-spouse has blocked the other parent's visitation with the children?

\_\_\_\_\_

71. If so, explain, giving dates and frequency with which visitation was allegedly blocked:

\_\_\_\_\_

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72. Will it be alleged that you or your spouse or your ex-spouse has discouraged the children from having a good relationship with a stepparent or a "significant person" in the other parent's life?

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73. If so, explain:

**Cooperation between You and Your Spouse or Ex-Spouse:**

74. How well have you and your spouse or ex-spouse been able to cooperate on matters concerning the children and on matters concerning visitation or access to the children?

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75. To what extent do you and your spouse or ex-spouse share values regarding how the children should be raised, what type of education they should have, and what type of religious training they should have?

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**Frequency of Moves and Plans to Move:**

76. Have you or your spouse or your ex-spouse moved in the last ten years?

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77. If so, when and where? (Include moves in the same city.)

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78. Do you or your spouse or your ex-spouse plan to move in the near future?

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79. If so, when and where? \_\_\_\_\_

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80. Does the parent who is not moving oppose the move? \_\_\_\_\_

81. Why? \_\_\_\_\_

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**Children's Preferences**

82. Have the children told you with whom they want to live? \_\_\_\_\_

83. If so, please answer these questions:

What is the basis for the preference? \_\_\_\_\_

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How strong is the preference? \_\_\_\_\_

How long has the preference been held? \_\_\_\_\_

Has the preference changed? \_\_\_\_\_

How would you feel about the children's talking to the judge about their preferences?

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**Children's Relationship with Other Family Members:**

84. How do the children get along with each other? \_\_\_\_\_

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85. How do the children get along with stepparents? \_\_\_\_\_

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86. How do the children get along with stepbrothers and stepsisters?

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87. Do the children have a particularly close relationship with either or both sets of grandparents?

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88. Do the children have a strong relationship with anyone else that you believe is important?

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**Goals:**

89. What are your future goals with the children and the reasons for your goals?

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90. To what extent do you believe that you and your spouse or ex-spouse should have joint custody (sometimes referred to as "shared parental responsibility"), under which you both would share equally in making major decisions affecting the children and/or being with the children for substantial periods of time?

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91. What are your spouse's or ex-spouse's goals with the children and the reasons for these goals?

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92. Have you and your spouse or ex-spouse attempted to work out a settlement of the case between yourselves?

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93. What progress have you made? \_\_\_\_\_

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94. What are your positions? \_\_\_\_\_

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**Witnesses:**

95. Who do you think would make good witnesses for you, and what do you think the testimony would be? (Possible witnesses include neighbors, the children's teachers, friends, doctors, baby-sitters, day-care workers, clergy, and family members.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_

Work phone: \_\_\_\_\_

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96. Who do you think will be witnesses for your spouse or ex-spouse, and what do you think will be the testimony of those persons?

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
\_\_\_\_\_