

Family Law Case Information Sheet

Case Number (Clerk fills in case #):

Exempt from Public Disclosure

Fill out this form to start a Family Law case.
The information you give us is **private**.

1. Describe your case: ☐ Divorce ☐ Custody ☐ Paternity ☐ Guardianship ☐ Adoption ☐ Protective Order
☐ Other _____

2. Information about Petitioner

Name: _____
First Middle Last

Any other names used: _____

Address: _____
Street City State Zip

Mailing Address: _____

Phone numbers: _____
Home Work Cell

Employer's name: _____

Social Security Number: _____ Date of Birth: _____ Sex: ☐ Male ☐ Female

Is English your first language? ☐ Yes ☐ No *If no, what language?* _____

Do you speak, read and write English? ☐ Yes ☐ No

3. Information about Respondent

Name: _____
First Middle Last

Any other names used: _____

Address: _____
Street City State Zip

Mailing Address: _____

Phone numbers: _____
Home Work Cell

Employer's name: _____

Social Security Number: _____ Date of Birth: _____ Sex: ☐ Male ☐ Female

Is English your first language? ☐ Yes ☐ No *If no, what language?* _____

Do you speak, read and write English? ☐ Yes ☐ No

4. Children under 18 in this case *(List your children and the children of the person in ☐)*

Child's name	Date of birth	Social Security No.	Whose child?
1. _____	_____	_____	<input type="checkbox"/> Mine <input type="checkbox"/> Ours <input type="checkbox"/> Other*
2. _____	_____	_____	<input type="checkbox"/> Mine <input type="checkbox"/> Ours <input type="checkbox"/> Other*
3. _____	_____	_____	<input type="checkbox"/> Mine <input type="checkbox"/> Ours <input type="checkbox"/> Other*
4. _____	_____	_____	<input type="checkbox"/> Mine <input type="checkbox"/> Ours <input type="checkbox"/> Other*

* If Other, whose? (If there is more than one other parent, list name and specify relationship): _____

Who do the children live with now? *(name and relationship)*: _____

5. Other Cases Involving Children

List any child support, custody, adoption, or guardianship order for any child listed on this form:

Case Number	Date of Order (or date requested)	County / State	For which children?	Type of case
1.				<input type="checkbox"/> Support <input type="checkbox"/> Custody <input type="checkbox"/> Adoption <input type="checkbox"/> Guardianship
2.				<input type="checkbox"/> Support <input type="checkbox"/> Custody <input type="checkbox"/> Adoption <input type="checkbox"/> Guardianship
3.				<input type="checkbox"/> Support <input type="checkbox"/> Custody <input type="checkbox"/> Adoption <input type="checkbox"/> Guardianship
4.				<input type="checkbox"/> Support <input type="checkbox"/> Custody <input type="checkbox"/> Adoption <input type="checkbox"/> Guardianship

6. Other Cases Involving Violence or Abuse

List any protective order, domestic violence or child abuse cases involving any adult or child listed on this form:

Case Number	Who was the Order against?	Who did the Order protect?	Date of Order (or date requested)	County / State	Type of case
1.					<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Child Abuse <input type="checkbox"/> No Contact Order
2.					<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Child Abuse <input type="checkbox"/> No Contact Order
3.					<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Child Abuse <input type="checkbox"/> No Contact Order
4.					<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Child Abuse <input type="checkbox"/> No Contact Order