FAMILY COURT SERVICES INTAKE FORM MEDIATION OR CHILD CUSTODY RECOMMENDING COUNSELING

THE INFORMATION REQUESTED BELOW IS TO ASSIST YOUR MEDIATOR OR RECOMMENDING COUNSELOR IN PROVIDING BETTER SERVICES AND MAY BE USED ONLY IN A <u>SEALED</u> CCRC REPORT FILED IN YOUR CASE

Mailing address: City	Your Full Name:	Your Date of birth:				
Cell phone: ()	Home address:	City	StateZip			
Email addresses: Case Number(s) Mailing Address: Cell: ()	Mailing address:	City_	StateZip			
Mailing Address: Cell: (Cell phone: ()	Work/Home phone: ()			
Mailing Address: Cell: ()	Email addresses:	Attorney:	Tel:			
Are there orders from another county or from juvenile court concerning your children? YES NO Is there an open Child Protective Services Case for you or the other party/parent? YES NO Are you comfortable meeting together with the other person during your session? ** YES NO Are there police reports for abuse/violence for you, your children, or the other parent? ** YES NO Have there ever been legal charges for abuse/violence for any person in this case? ** YES NO Have you or the other party ever had a Protective Order or Restraining Order? ** YES NO Is there any current Criminal Case for you or the other party? YES NO Is there any current Criminal Case for you or the other party? YES NO **IF YOU WANT SEPARATE SESSIONS &/OR A SUPPORT PERSON WITH YOU, PLEASE CHECK HERE There was violence or abuse of (check all that apply): NOBODY ** YOU THE CHILDREN THE OTHER PARENT OTHER PEOPLE PARTNER ABUSE PROCEDURES NOTICE (California Rules of Court 5.215): If someone involved in this case has written about experiencing domestic violence under oath or is protected by a Restraining Order, they can ask for private meetings or have someone with them for support during meetings. If you're the one being protected, you can choose to skip individual meetings if it's appropriate. (Family Code Section 3181). Family Court Services will automatically meet with each of you separately if you have an open protective order. A mediator or counselor can ask a support person to leave if they get involved in the mediation or counseling session, or if they try to speak for someone else, or if their presence disturbs the process. However, having a support person there doesn't mean the confidentiality of the mediation or counseling is waived. (Family Code Section 6303). **Custody Orders** We have: Shared Legal Sole Legal to Shared Physical Sole Physical to There aren't orders want: Shared Legal Sole Legal to Shared Physical Sole Physical to There aren't ord	Other Party's Full Name:	Cas	e Number(s)			
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PRINTSIGN DATE	agree to appear at all sessions and to cooperate in to attend my appointment, or to cooperate with the	the mediation or child custody recom	nending counseling process. If I fail			
	PRINTSIGN		DATE			

When are the child(ren) with you and who	en are they with th	e other parent	?	No schedule	e/Not app	licable
What are your parenting time goals for Mediation/CCRC today?			☐ Not applicable			
Will a decrease of the second	111144		. 1:-4:/00	CDC 4- 19		7 NT
What parenting or coparenting concerns would you like to talk about in M			ediation/CC	KC loday?	None	
Please <u>check everyone</u> who lives in your	house part-time o	r full-time: TO	OTAL ADU	LTSTO	TAL KII	DS
☐MY PARTNER/SPOUSE☐FRIENDS/HOUSEMATES						
Please list all children in this court case	:				Child liv	ves with:
NAME	DOB		AGE	SEX	Mo_	Fa
NAME	DOB		AGE	SEX	Mo_	Fa
NAME	DOB		AGE	SEX	Mo	Fa
NAME	DOB		AGE	SEX	Mo	Fa
Please list any children not listed, above,	who live in your h	nome, even if o	nly part-tim	<u>ıe</u> :		
NAME	AGE	SEX	RELA	TIONSHIP_		
NAME	AGE	SEX	RELATIONSHIP			
NAME	AGE	SEX	RELATIONSHIP			
NAME	AGE	SEX	RELATIONSHIP			
Please list <u>wour work</u> schedule information	on:			None/Not a	pplicable	
Type of Work			City:			
Work Days/Hours/Schedule:						
Please list your school, therapy, or other	schedule informat	ion:		None/Not a	pplicable	
Please list your children's schedule infor	rmation for school	, any activities	, regular the	erapy appoin	tments, e	tc.:
School Name	City: Hours:			s:		
Other Schedules:						
School Name				Hours	s:	
Other Schedules:						