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The Self Help Legal Information Network

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www.legalinfonetwork.com

Divorce or Legal Separation Questionnaire with Children

I am providing this information for the purpose of completing a Divorce Petition. I understand if I have any questions, concerns or need legal advice I may need to contact an attorney. I understand The Self-Help Legal Information Network are not attorneys and cannot give legal advice (ie. tell me the best method for my situation, tell me what forms to complete, tell me the process, or give me their opinion). I understand that I am responsible for filing and/or serving any necessary documents unless otherwise noted.

PLEASE NOTE: We provide document preparation for non-contested divorces, legal separations or annulments. If it becomes contested you may need to seek the assistance of an attorney.

Name

Date

Signature

Divorce / Legal Separation Questionnaire

You are requesting: Legal Separation Divorce (Dissolution of Marriage)

Based on: Irreconcilable differences Incurable insanity Never legally married

1. _____
Full name of husband (include first, last and middle)

2. _____
Full name of wife (include first, last and middle)

3. _____
Maiden name of wife

4. Do you want your
maiden name back? yes no

5. _____
full address of husband (how long at this address?)

6. _____
full address of wife (how long at this address?)

_____ list other address if at previous address for less than 5 years

7. Date of Marriage _____

8. Date of Separation _____

9. Your telephone number to go on petition _____

Home phone _____ cell _____

message _____ (can we leave messages re; your

case on this number) YES NO

10. Have you been a resident of California at least six months and of Los Angeles County for at least three months? Yes No

Did you want an order for spousal support? YES NO

Did you want to pay spousal support YES NO if so how much? _____

For contested matters an attorney may need to be consulted.

11. List all personal/separate property of wife [debts & assets] including jewelry, art, antiques, coin collections etc. (On all following questions attach additional sheets as necessary).

Property / WIFE	Fair market value	Debt / amount owed	Date acquired	Goes to Wife or Husband

12. List all personal/separate property of husband.

Property / HUSBAND	Fair market value	Debt owed	Date Acquired	Goes to wife / husband

ATTACH SHEETS AS NEEDED				

13. List all community personal property.
 (All property that was purchased while you were married).

Property / COMMUNITY	Fair market value	Debt owed	Date Acquired	Goes to Wife / Husband

14. List all community real property.

Property / COMMUNITY	Fair market value	Debt owed	Who will keep wife / husband

15. List all bank accounts, (checking & savings) credit union accounts, retirement funds, all policies, stocks, bonds, equity, credit (excluding credit cards), interest in businesses, and all other items of value not mentioned above.

Account, Account number and Branch Address	Fair market value	Debt	Goes to wife / husband

16. List any additional items not listed above / or as an attachment sheet

Item / account #	Fair market value	Debt	Goes to wife / husband

CHILD CUSTODY / VISITATION AND OR SUPPORT ISSUES

**PLEASE NOTE: GENERAL VISITATION AND CUSTODY IS INCLUDED.
CHILD SUPPORT AND SPECIFIC VISITATION REQUESTS ARE EXTRA.**

1. Any children from or before this marriage or adopted? If so please indicate.

Full Name of child (first, middle, last) specify if child is adopted, born of this marriage, or before this marriage. (for unborn - write unborn)	Birth date / age	Birth place (city & state)	Sex M / F
	__-__-__ / ____		
	__-__-__ / ____		
	__-__-__ / ____		
	__-__-__ / ____		
	__-__-__ / ____		

2. Would you like to obtain a ruling on anything listed below? If so please indicate.

- Child Custody
- Child visitation
- Child support amount
- Family support
- Spousal support
- Property division

3. Any prior court orders or proceeding in regards to this issue? If so please state case number, court issue and date of claim.

4. Who will child reside with? Mom Dad

Other (please state) _____

Their address

5. What address has the child / children resided in the past 5 years

6. You are requesting the court to grant:

petitioner respondent joint other

Legal custody for:

Physical custody for:

Visitation granted to

7. Visitation order request: (please list any holidays , school breaks, and vacations)

8. Approximate percentage of time each parent requests physical responsibility for the child.

Mom % Dad % Both %

9. Additional child support requested

Educational \$ _____ Special needs \$ _____

Travel Expense for visitation \$ _____

Other \$ _____

10. Any special hardship deductions requested _____

Children from previous relationships \$_____ (monthly payments)

Does child(ren) live with you? Yes No

11. Does either parent drink, do drugs or have any other problems? _____

If so what? _____

_____ which parent _____

12. Do you wish to change name of child? Yes No

If so to what: _____

Why? _____

13. Has anyone else filed any paperwork in any courts regarding this child?

Yes No

If so in what court? _____ What date? _____

Is the action still active? Yes No Pending? Yes No Order or Judgment?

14. Is there any other custody proceedings regarding this child in another court?

If so where? _____

What type of proceeding? Divorce___ Guardianship ___ Other _____

Status of proceeding? _____

If there is an active or pending action or a judgment or order you need to bring the paperwork to the office at your next meeting when turning in these documents. All proof of income you need to take with you to court or attach to your petition. (last 2 yrs of tax returns and last 3 pay stubs.)

15. Is there anyone, not a party to this proceeding, who has any claims for physical custody, rights to visitation or interest in this child?

If so please state:

Name of person	Address	Relationship (if any)	Claim	Name of Child

16. Any additional expenses or other children you are caring for not mentioned? If so please list.

17. Who currently pays for health care expenses for the child(ren)? MOM DAD

Other: _____ How much is it monthly? _____

18. Who will pay for health care for the child(ren) after the divorce? MOM DAD

other: _____

19. What is the name, address and telephone number of the health care provider for the child (ren)?

Name _____

Address _____

Phone: _____

PLEASE COMPLETE THE INCOME AND EXPENSE QUESTIONNAIRE ALSO.