

Client Interview Sheet

Date: _____

Please complete the Questionnaire. If you will spend the time to complete all items, you will give us the background information necessary to begin to understand the complexity of the personal aspects of your family law problem. All information will be held in strict confidence.

1. Please give your & your spouse's full names, dates and places of birth, social security numbers and driver's license numbers.
 - a) Name: _____
 - b) Date of birth: _____ c) Place of birth: _____
 - d) Social security number: _____ e) Driver's license number: _____

2. Where are you living now?
 - a) Address: _____
 - b) Telephone number: _____ Cell number: _____

If your mailing address is different from your physical address, please list both.

3. Please complete the following concerning your and your spouse's employment.
 - a) Employer: _____
 - b) Job Title: _____
 - c) Address: _____
 - d) Telephone number: _____ Length of employment: _____
 - e) Gross salary per month or annually: \$ _____
 - f) Education: _____

4. Please give the full name, date and place of birth, and social security number of the mother of the children.
 - a) Name: _____
 - b) Date of birth: _____ c) Place of birth: _____
 - d) Social security number: _____ e) Driver's license number: _____

5. Where is the mother of the children living and what is her telephone number?
 - a) Address: _____
 - b) Telephone number: _____

6. Please complete the following concerning the mother's employment.
 - a) Employer: _____

- b) Job title: _____
- c) Address: _____
- d) Telephone number: _____ Length of employment: _____
- e) Gross salary per month or annually: \$ _____
- f) Education: _____

7. Please give the full name, date and place of birth, and social security number of the father of the children.

- a) Name: _____
- b) Date of birth: _____ c) Place of birth: _____
- d) Social security number: _____ e) Driver's license number: _____

8. Where is the father of the children living and what is his telephone number?

- a) Address: _____
- b) Telephone number: _____

9. Please complete the following concerning the father's employment.

- a) Employer: _____
- b) Job title: _____
- c) Address: _____
- d) Telephone number: _____ Length of employment: _____
- e) Gross salary per month or annually: \$ _____
- f) Education: _____

10. Please give full name, date and place of birth, sex, and Social Security number of each child of this relationship:

- a) Name: _____
Sex: _____ Birthplace: _____ Birth date: _____
Social Security number: _____
- b) Name: _____
Sex: _____ Birthplace: _____ Birth date: _____
Social Security number: _____

11. Are the children covered under any health insurance policy? _____ Monthly cost? _____
If so, what is the company's name? _____ Policy Number: _____

12. Will there be a dispute over custody of the children? _____
If not, custody will be with whom? _____

13. Where are the children living at this time? _____
14. List all property (other than furniture and clothing) owned by the children. _____

15. How long has the mother of the children lived in Texas? _____