

H.O.P.E for Sunny Skies

Richmond, TX

281-720-6611

Date: \_\_\_\_\_

## VISITATION INTAKE FORM: VISITING PARENT

### CUSTODIAL PARENT

1) Name: \_\_\_\_\_

2) DOB: \_\_\_\_\_ Age: \_\_\_\_\_

3) SSN: \_\_\_\_\_

4) TDL: \_\_\_\_\_

Vehicle (Make, Model, Year, Color): \_\_\_\_\_

Tag #: \_\_\_\_\_

5) Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Children:

Name	Age

6) Phone Contact:

Home:	Cell:
Work:	Emergency:

Emergency contact information: \_\_\_\_\_

7) Place of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Work Schedule: \_\_\_\_\_

8) If unemployed live with [ ] spouse, [ ] relatives, [ ] other (specify): \_\_\_\_\_

9) Who is responsible for the fees? \_\_\_\_\_

10) Referred by:

- Judge
- Attorney
- Mediation
- CPS
- OAG
- Other (specify) : \_\_\_\_\_

11) Beginning and ending dates of supervision: \_\_\_\_\_

12) If you have an attorney, please provide contact information below:

Name	Address	Phone/Fax/E-mail

13) Last court appearance? \_\_\_\_\_

14) Schedule recommended by the Court: \_\_\_\_\_

15) Are you separated/divorced from child's other parent? When? \_\_\_\_\_

16) Why are supervised visits or exchanges necessary?

- Substance Abuse (specify): \_\_\_\_\_
- Mental Illness (specify): \_\_\_\_\_
- Kidnapping (date of incident or threat): \_\_\_\_\_
- Domestic Violence (date of PO): \_\_\_\_\_
- Police Intervention (specify): \_\_\_\_\_
- Criminal Record (specify): \_\_\_\_\_
- Child Abuse/Neglect (specify): \_\_\_\_\_
- Other (specify): \_\_\_\_\_

17) Has CPS ever been involved with the family? \_\_\_\_\_ When? \_\_\_\_\_

What reason? \_\_\_\_\_

18) Has the Attorney General's office ever been involved? \_\_\_\_\_

Explain.

\_\_\_\_\_

19) Have you ever been ordered or voluntarily taken parenting classes? \_\_\_\_\_

21) Are you under the care of a physician for any chronic condition? \_\_\_\_\_

If so, for what? \_\_\_\_\_

22) Do you qualify for public benefits or services through any government or social service agency? \_\_\_\_\_

If so, please specify: \_\_\_\_\_

\_\_\_\_\_

23) When was the last visit or exchange with the children and was it supervised? \_\_\_\_\_

24) What problems, if any, do you expect from the other party with visits or exchanges? \_\_\_\_\_

\_\_\_\_\_

25) What do you hope the outcome from this experience will be? \_\_\_\_\_

\_\_\_\_\_

26) Questions, concerns or comments: \_\_\_\_\_

\_\_\_\_\_

**Thank you for choosing H.O.P.E. for Sunny Skies!!**