THOMPSON LAW OFFICE DIVORCE QUESTIONNAIRE WITH CHILDREN

REQUIRED INFORMATION FROM CLIENT:

Full Name:			
Telephone Number: ()			
Email Address: Best C	Contact:		
Social Security Number:			
Present Home Address:			
Date of Birth:	Age:		
Place of Birth:			
Race:			
Length of Residency in Kentucky more than 180 days?			
Occupation:			
Type of Industry:			
Prior Marriages, how many; How t	terminated		
Date of Present Marriage:			
What County: What S	State:		
Date of Separation (Month/Year):			
Is there an Emergency Protective Order in effect?			
Is there a Domestic Violence Order in effect?			
Is a Domestic Violence Order requested in this proceeding?			
Are You or Your Spouse on Active Duty in the Military Service?			
If you are Wife: Maiden name:			
Do you wish for maiden name to be restored:			
REQUIRED INFORMATION FOR SPOUSE:			
Does spouse have an attorney? (Circle one) YES NC	O UNKNOWN		
If yes, what is attorney's name and address:	-		
Full Name:			
Telephone Number: ()			
Social Security Number:			

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Present Home Address:	·		
Date of Birth:		Age:	
Place of Birth:			
Spouse's Length of Res	idency in Kentucky more	e than 180 days?	
Spouse's Occupation: _			
Type of Industry:			
Spouse's Prior Marriage	es, how many	; How terminated	
If Respondent is Wife: N	Maiden Name:		
Does she wish f	for maiden name to be re	estored:	
CHILDREN BORN TO	THE PARTIES:		
Full Names:	Birthday:	Social Security Number:	School Grade?
Children's present addre	ess:	<u> </u>	
Address where children	have lived for the past (5	5) years:	
Names and addresses of	of persons with whom the	e children have lived during that p	period:
Have you participated in other state?	any other litigation cond	cerning the custody of the same of	children in this or any
	son not a party to this pro or visitation rights with re	oceeding that has physical custo espect to the children?	dy of the children or
If there are children born Custody? Specify:	n to the parties, WHAT IS	S THE CUSTODY REQUESTED	? Sole Custody? Joint