

## Personal Details

	<b>Client</b>	<b>Partner</b>	<b>Child 1</b>	<b>Child 2</b>	<b>Child 3</b>
Full Name	_____	_____	_____	_____	_____
Date of Birth	_____	_____	_____	_____	_____
Full Address	_____	_____	_____	_____	_____
Home Tel.	_____	_____	_____	_____	_____
Work Tel.	_____	_____	_____	_____	_____
Mobile No.	_____	_____	_____	_____	_____
Email address	_____	_____	_____	_____	_____
Correspondence address (if different from above)	_____	_____	_____	_____	_____
Date of marriage	_____	_____	_____	_____	_____
Who has Marriage Cert	_____	_____	_____	_____	_____
Religion	_____	_____	_____	_____	_____
Address that you last lived at with your partner	_____	_____	_____	_____	_____
Have you been married before?	_____	_____	_____	_____	_____
Any previous proceedings?	_____	_____	_____	_____	_____
What is your relationship to all the children?	_____	_____	_____	_____	_____
What is your partner's relationship to the children?	_____	_____	_____	_____	_____
Children's schools	_____	_____	_____	_____	_____
Disability or chronic illness	_____	_____	_____	_____	_____
Who looks after the children?	_____	_____	_____	_____	_____
What type of house do the children live in?	_____	_____	_____	_____	_____
Social Services?	_____	_____	_____	_____	_____