



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 1/11**

**I. PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**ATTORNEY INFORMATION**

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**II. RESIDENCE**

What neighborhood do you reside in? \_\_\_\_\_  
With whom do you reside? \_\_\_\_\_  
Do you rent or own your residence? \_\_\_\_\_  
How long have you lived at your present address? \_\_\_\_\_  
How long do you expect to live at your present address? \_\_\_\_\_  
Where did you reside the past two years? Please List: \_\_\_\_\_  
\_\_\_\_\_  
Is there an issue relating to the opposing party's residence? If so, describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 2/11**

**III. CHILDREN**

1.	Full Name	Age	DOB	Grade	School
2.	Full Name	Age	DOB	Grade	School
3.	Full Name	Age	DOB	Grade	School
4.	Full Name	Age	DOB	Grade	School

What time do each of these children have to be in school and what time do they arrive? \_\_\_\_\_

What activities are the children participating in school? \_\_\_\_\_

What extracurricular activities are the children involved in? \_\_\_\_\_

**IF THE CHILDREN ARE IN DAYCARE**

Name of Daycare: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cost of daycare: \_\_\_\_\_

*provide documentation*

How often are the children in daycare and what are the time the children arrive to and leave from daycare? \_\_\_\_\_

What activities are provided at the daycare provider for the children? \_\_\_\_\_

Please describe the children's daily schedule? \_\_\_\_\_



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 3/11**

Give a physical description of the children.

1.	_____	_____	_____	_____	_____
	First Name	Height	Weight	Hair Color	Other
2.	_____	_____	_____	_____	_____
	First Name	Height	Weight	Hair Color	Other
3.	_____	_____	_____	_____	_____
	First Name	Height	Weight	Hair Color	Other
4.	_____	_____	_____	_____	_____
	First Name	Height	Weight	Hair Color	Other

What, if any, physical limitations do the children have? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of pediatrician: \_\_\_\_\_  
Phone number of pediatrician: \_\_\_\_\_  
How often do the children see the doctor? \_\_\_\_\_  
What, if any, medical issues do the children face? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any, dental or orthodontic issues are the children facing? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any issues involving children's behavior at home, school, or daycare? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What methods of discipline do you use in raising the children? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any educational issues facing any of the children? *(Failing school, special education, absenteeism, etc?)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 4/11**

How flexible is the custodial parent in allowing the other parent to see the child(ren) in addition to the ordered child custody? \_\_\_\_\_

How active is the noncustodial parent in rearing the child(ren)? *(School, doctors, etc.)* \_\_\_\_\_

How involved was the noncustodial parent in raising the children while parties were living together?

How much involvement does the custodial parent allow the noncustodial parent to participate? \_\_\_\_\_

What, if any, problems do you have with the other party following through with the court order visitation?

How much involvement in the child(ren)'s lives should the other party have? \_\_\_\_\_

What is your greatest strength in raising the child(ren)? \_\_\_\_\_

What is your worst weakness in raising the child(ren)? \_\_\_\_\_

What is the other party's greatest strength in raising the child(ren)? \_\_\_\_\_

What is their worst weakness in raising the child(ren)? \_\_\_\_\_

Do you have a pet? \_\_\_\_\_

What are the child(ren)'s greatest needs at this time in their life? \_\_\_\_\_



# FrancesDyal

FAMILY LAW

## GUARDIAN AD LITEM QUESTIONNAIRE 5/11

What is/are the child(ren)'s weaknesses? \_\_\_\_\_  
\_\_\_\_\_

What is/are the child(ren)'s strengths? \_\_\_\_\_  
\_\_\_\_\_

Have you attended any parenting classes or seminars regarding the child(ren), or dealing with children of divorced families? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any thing else, do you wish me to know concerning what is in your child(ren)'s best interest? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### IV. CHILDREN

Where were you born? \_\_\_\_\_

Parent's name and addresses:

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

1. \_\_\_\_\_  
First Name                      Age                      Location                      Present Status
2. \_\_\_\_\_  
First Name                      Age                      Location                      Present Status
3. \_\_\_\_\_  
First Name                      Age                      Location                      Present Status
4. \_\_\_\_\_  
First Name                      Age                      Location                      Present Status



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 6/11**

Briefly describe your family history: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your present relationship with your family? \_\_\_\_\_  
\_\_\_\_\_

What do you consider to be your hometown? Why? \_\_\_\_\_  
\_\_\_\_\_

If military, what is your home of record? \_\_\_\_\_  
\_\_\_\_\_

How do your family members get along with the opposing party and his/her family? \_\_\_\_\_  
\_\_\_\_\_

Please describe contact your family members have with the children? \_\_\_\_\_  
\_\_\_\_\_

Please describe contact the opposing party's family has with the children (to the best of your knowledge):  
\_\_\_\_\_  
\_\_\_\_\_

How do your family members talk about the opposing party and/or his/her family front of the children or when the children are nearby? \_\_\_\_\_  
\_\_\_\_\_

Do you have any concerns about how the opposing party and/or his/her family and friends talk about you and/or your family in front the children? Please describe: \_\_\_\_\_  
\_\_\_\_\_

What role has your family played in the upbringing and care of the children? \_\_\_\_\_  
\_\_\_\_\_

What role has the opposing party's family played in the upbringing and care of the children? \_\_\_\_\_  
\_\_\_\_\_



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 7/11**

**V. EDUCATIONAL BACKGROUND**

What was your highest grade of education completed? \_\_\_\_\_

Have you obtained a GED or equivalent? \_\_\_\_\_

Please describe any trade you have been trained in. Did you complete the training and obtain work in that trade? \_\_\_\_\_

List any other school attended and what was studied? Did you receive a degree?

1. \_\_\_\_\_  
School Studied Degree Y/N
2. \_\_\_\_\_  
School Studied Degree Y/N
3. \_\_\_\_\_  
School Studied Degree Y/N

**VI. EMPLOYMENT STATUS**

What is your present occupation? \_\_\_\_\_

Name of your employer? \_\_\_\_\_

Address of employer? \_\_\_\_\_

How long have you been employed there? \_\_\_\_\_

Are you self-employed?  Yes  No Do you own a business?  Yes  No

If so, please explain: \_\_\_\_\_

What is your weekly work schedule?

MON: \_\_\_\_\_ TUES: \_\_\_\_\_ THURS: \_\_\_\_\_ FRI: \_\_\_\_\_ SAT: \_\_\_\_\_ SUN: \_\_\_\_\_

How flexible is your weekly work schedule? \_\_\_\_\_

How much vacation do you get per year, including holidays? \_\_\_\_\_

Does the opposing party have any concerns regarding your work schedule, time off or type of occupation? If their concerns affect the raising/upbringing of the children, please describe: \_\_\_\_\_



# FrancesDyal

FAMILY LAW

## GUARDIAN AD LITEM QUESTIONNAIRE 8/11

Do you have any concerns regarding the work schedule, time off or type of occupation of the opposing party? if these concerns affect the raising/upbringing of the children, please describe: \_\_\_\_\_

\_\_\_\_\_

Are medical benefits offered at your employment? If so, please describe: \_\_\_\_\_

\_\_\_\_\_

Previous employers for the past two years:

1. \_\_\_\_\_  
Name Address

2. \_\_\_\_\_  
Name Address

3. \_\_\_\_\_  
Name Address

4. \_\_\_\_\_  
Name Address

Do you anticipate any change of employment or transfer in the near future? \_\_\_\_\_

\_\_\_\_\_

Please describe if you are receiving income from any other source (i.e. AFDC, SSI, etc.): \_\_\_\_\_

\_\_\_\_\_

Have you ever been fired from any employment? If so, describe: \_\_\_\_\_

\_\_\_\_\_

Have you ever been fired from work for a substance abuse problem? If so, describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 9/11**

**VII. IF MILITARY**

Rank: \_\_\_\_\_ Sea or Sure Duty? \_\_\_\_\_

Do you anticipate a change of station in the near future? \_\_\_\_\_

When do you anticipate leaving the military (through retirement, enlistment being up, etc.)? \_\_\_\_\_

Please provide your most recent Military Evaluation? \_\_\_\_\_

Have you ever been disciplined by the military? If so, give details. \_\_\_\_\_

**VIII. CRIMINAL/TRAFFIC RECORD**

Do you presently have a driver's license? \_\_\_\_\_

Have you ever been arrested for any criminal offense? If so, please give details of each arrest: \_\_\_\_\_

Are there any criminal offense pending against you? If so, please explain: \_\_\_\_\_

Have you ever been arrested for any traffic offense other than speeding? If so, please give details of each arrest: \_\_\_\_\_

Have you ever been convicted of a misdemeanor? If so, please give details of each conviction: \_\_\_\_\_

Have you ever been convicted of a felon? If so, please give details of each conviction: \_\_\_\_\_



# FrancesDyal

FAMILY LAW

## GUARDIAN AD LITEM QUESTIONNAIRE 10/11

Have you ever been on probation, sentenced to active penitentiary or jail time, placed in a community diversion program, or ordered to be of good behavior by any court? \_\_\_\_\_

\_\_\_\_\_

Have you ever been ordered into a substance abuse program, ASAP program, domestic abuse program or counseling? \_\_\_\_\_

\_\_\_\_\_

To the best of your knowledge, would the opposing party answer yes to any of the above questions? If so, please give details: \_\_\_\_\_

\_\_\_\_\_

### IX. MEDICAL BACKGROUND

Are you presently taking any prescribed medication? If so, please provide the name of the medication, why you are on it, and how long you have been on it:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Have you ever seen a counselor, therapist, licensed social worker, or psychiatrist? If so, please give details:

\_\_\_\_\_

Have you ever been diagnosed with a mental or emotional disorder? If so, please describe: \_\_\_\_\_

\_\_\_\_\_

Have you ever been tested positive for any illegal drugs during a drug screening? If so, please give details:

\_\_\_\_\_

Have you ever attended drug counseling, AA, or NA? \_\_\_\_\_



**FrancesDyal**  
FAMILY LAW

**GUARDIAN AD LITEM QUESTIONNAIRE 11/11**

What, if any contact, have you had with Comprehensive Mental Health Program, Comprehensive Substance Abuse Program, Navy Family Advocacy, Dept. of Social Services, or any similar organization or agency? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To the best of your knowledge, would the opposing party answer "yes" to any of the above questions? If so please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical disability, condition or disease? If so, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any, health insurance coverage do you have for yourself? \_\_\_\_\_  
\_\_\_\_\_

**X. RELATIONSHIP HISTORY**

Please describe the history of your relationship with the opposing party? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have you known each other? \_\_\_\_\_

If you were married, what was the date of your marriage? \_\_\_\_\_

When did you separate? Why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the final decree been entered? If so, when and where? \_\_\_\_\_

If not, is there a divorce pending? \_\_\_\_\_

Is there any history of abuse in your relationship? If so, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Completed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_