DIVORCE

____ CHILDREN _____ NO CHILDREN

CLIENT AND SPOUSE INFORMATION:

Client:

1. Full legal name:
2. Current physical address:
3. Home of record:
4. Phone #:
5. Email:
6. Employer
7. Unit/company
8. Grade
9. Gross monthly income (salary before taxes… the number before your net pay)

Spouse:

1. Full legal name:
2. Current physical address:
3. Home of record:
4. Employer
5. Unit/Company:
6. Grade:
7. Gross monthly income (Salary before taxes…. The number before your net pay)

DO YOU OR YOUR SPOUSE HAVE AN ATTORNEY?_____

MARRIAGE INFORMATION

1. How long have you been physically located at Fort Polk?

2. Date of marriage:

3. City and state of marriage

4. Children:
    a. Amount:
    b. Names and ages of children:

5. Have you and your spouse separated? If yes continue with section A if not please go to Section B
    a. When did you and your spouse separate?
        i. Who is living in the family home?
    b. When do you intend to separate?
        i. Who will live in the family home?

6. Have either of you filed for divorce yet?
    a. No
    b. Yes
        i. Which state?

<u>CHILDREN</u> (IF YOU HAVE NO CHILDREN SKIP TO NEXT STEP):

1. Are there children born or adopted within the marriage
    a. Yes
    b. No

2. If you have children:
    a. Where are the children currently living?

    b. Do you have a custody schedule with the other parent?
        i. If you do please provide:
        ii. _____
        _____
        _____
        _____
        _____

    c. Have you and the other parent discussed child support?
        i. If so please provide the amount to be paid by each spouse
        ii. _____
        _____
        _____

    d. Has the other parent relocated to another state?
        i. If so, where?_____

SAFETY AND EMERGENCY ISSUES

1. Are you in a safe place?

2. Do you have a temporary restraining order against you or against your spouse?
    a. If you do, which state is it out of? _____

3. Do you have a Military protective order against you or against your spouse?

4. Are there concerns involving any of the following:
    a. ___ domestic violence
    b. ___ child abuse/neglect
    c. ___ substance misuse
    d. ___ mental health concerns
    e. ___ child abduction/withholding/ alienation
    f. ___ passport or international travel concerns
    g. ___ school attendance or educational decision issues
    h. ___ firearm safety concerns
    i. ___ other:
        i. _____
        _____
        _____
        _____

ADDITIONAL INFORMATION

Benefits:

1. Who provides health insurance for the family?
    a. Does this include dental? _____

Property

1. Do you own any property together (land, cars, rental homes, home etc.)
    a. _____
    _____
    _____
    _____
2. Do you have any debt with your spouse?
    a. _____
    _____
    _____
    _____

Expenses

1. Please list the following expense:
    a. Rent/mortgage:_____
    b. Utilities: _____
    c. Food:_____
    d. Vehicle:_____
    e. Vehicle insurance:_____
    f. Phone:_____
    g. Childcare:_____
    h. School activities:_____

Support:

1. Are you paying support to your spouse? If so, how much?
    a. _____
2. Were you ordered to pay support to your spouse? If so by who and how much?
    a. _____
    _____
    _____
3. Are you receiving support from your spouse? If so, how much?
    a. _____

ETS/PCS/DEPLOY:

1. ARE YOU OR YOUR SPOUSE ABOUT TO DEPLOY, ETS OR PCS? IF SO PLEASE PROVIDE INFORMATION:

   _____

   _____

   _____

VERY IMPORTANT Please bring the following documents if available:

1. Divorce documents filed by either you or your spouse
2. Prenuptial or postnuptial agreements
3. Child care arrangements
4. Child support orders
5. Orders by your command requiring you to pay your spouse
6. Any orders by your command regarding child custody
7. Any Temporary restraining orders including military protective orders