

**SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER
FAMILY COURT SERVICES WORKSHEET**

Date: _____

Case Number: _____

Other Placer County cases file in this Court, i.e.: Guardianship, Juvenile, Criminal:

Case no. _____

Title of case: _____

Case no. _____

Title of case: _____

_____ & _____
Petitioner **Respondent**

_____ Mailing Address

_____ Mailing Address

_____ City, State, Zip Code

_____ City, State, Zip Code

_____ Telephone Number / Message Number

_____ Telephone Number / Message Number

_____ Email Address

_____ Email Address

_____ Date of Birth

_____ Driver's License #

_____ Date of Birth

_____ Driver's License #

_____ Place of Employment

_____ Place of Employment

_____ City

_____ Work Phone

_____ City

_____ Work Phone

_____ Attorney's Name

_____ Attorney's Name

_____ Attorney's Full Address

_____ Attorney's Full Address

_____ Attorney's Telephone Number

_____ Attorney's Telephone Number

<u>Full names of minor children</u>	<u>Age</u>	<u>Birthdate</u>	<u>Primary Residence</u>	<u>Name of school</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

IMPORTANT INFORMATION

_____ Separation Date _____ Length of Relationship _____ Previous Child Custody Recommending Counselor

MUST BE COMPLETED	Child Custody Recommending Counselor / Court Use Only	Case Disposition
Is there a history of domestic violence? _____ yes <i>or</i> _____ no	_____ Agree at Assessment (case concluded)	_____ Refer to FCS Evaluation
Request for separate counseling? _____ yes <i>or</i> _____ no	_____ Agree/rec at Assessment (case concluded)	_____ Refer to FCS Investigation
	Focus: _____	
	_____ Rec at Assessment (case concluded)	_____ Refer to Private Evaluation