



Erickson Counseling & Mediation PLLC

11107 McCracken Circle #A Cypress, TX 77429

Ericksoncounseling.com

832-455-5729

Each Parent's Personal Information

(Filled out by each parent separately)

Full Name:	
Date of birth:	
Current Address:	
Phone Numbers:	
Employment and current income:	
Years Married:	
Current Marital Status:	
Date Separated:	
Date Filed for Divorce:	

Attorney Information:	
Name:	
Address	
Phone #:	

Names and ages of children from marriage?	

Date of Next Scheduled Court Appearance if any: _____

Who referred you to Erickson Counseling & Mediation? _____

Unless already provided, please attach a copy of the current court order.

Printed Name: _____

Signature: _____

Date: _____

