Erickson Counseling & Mediation PLLC
12300 Dundee Court #202 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:	
Current Marital Status:	
Name of partner:	

Attorney Information:	
Name:	
Address	
Phone #:	
Children's Attorney:	
Name:	
Address:	
Phone #:	

Names of children from marriage?	

Names of people living in YOUR home:	

Date of Next Scheduled Court Appearance (If Any or NA) _____

Who referred you to this program? _____

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

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Length of Marriage: _____ Length of Separation: _____ Number of Separations: _____

Since your initial court appearances, number of times in court? Reason and Outcome? _____

_____

_____

Have you had a Social Study _____ Psychological Evaluation _____ (Please provide a copy if checked)

List current medical conditions and ongoing treatments: _____

_____

List all psychiatric medications you currently take: _____

_____

Any history of mental health issues with yourself or your biological family? _____

Any hospitalizations or admissions to a psychiatric facility or substance abuse program? _____

Since your initial court appearances, number of times in court? Reason and Outcome? _____

_____

_____

Drug/Alcohol Usage (frequency, amount) _____

_____

Have you been convicted of a crime other than a minor traffic violation? Explain:_____

_____

History of domestic violence, allegations of physical, emotional or sexual abuse? _____

_____

Has Child Protective Services ever been involved with your family at any point in the past? If yes, list allegations, date(s) of investigation and outcome(s).

_____

_____

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Are you or the co-parent subject to a protective order? (Attach a copy) _____

What are your goals in participating in the program? _____

_____

_____

What challenges do you foresee in co-parenting?

_____

_____

Name _____

Signature _____

Date_____

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Additional information: