

DIVORCE WITH CHILDREN QUESTIONNAIRE

HUSBAND'S INFORMATION

☐ Joint Custodian ☐ Primary Custodian ☐ Sole Custodian

FIRST, MIDDLE and LAST Name: _____

Social Security Number: _____

Date of Birth: _____

Phone Number: _____

Email Address: _____

Home Address: _____

City, State, ZIP: _____

Mailing Address (if different from Home Address): _____

City, State, ZIP: _____

Driver's License Number/State: _____

Ethnicity: _____

Name of Employer: _____

Employer's Address: _____ Employer's Phone #: _____

☐ 4TH Judicial – ELKO COUNTY

☐ 11th Judicial – LANDER COUNTY

OTHER: _____

WIFE'S INFORMATION

☐ Joint Custodian ☐ Primary Custodian ☐ Sole Custodian

FIRST, MIDDLE, and LAST Name: _____

Social Security Number: _____

Date of Birth: _____

Phone Number: _____

Email Address: _____

Home Address: _____

City, State, ZIP: _____

Mailing Address (if different from Home Address): _____

City, State, ZIP: _____

Driver's License Number/State: _____

Ethnicity: _____

Name of Employer: _____

Employer's Address: _____ Employer's Phone #: _____

CHILDREN'S INFORMATION

CHILD'S FIRST NAME	CHILD'S MIDDLE NAME	CHILD'S LAST NAME	JR.
CHILD'S DATE OF BIRTH	BORN – CITY & STATE	CHILD'S SOC. SECURITY #	AGE

CHILD IS CURRENTLY LIVING WITH: ☐ MOM ☐ DAD ☐ BOTH ☐ OTHER: _____

CHILD'S FIRST NAME	CHILD'S MIDDLE NAME	CHILD'S LAST NAME	JR.
CHILD'S DATE OF BIRTH	BORN – CITY & STATE	CHILD'S SOC. SECURITY #	AGE

CHILD IS CURRENTLY LIVING WITH: ☐ MOM ☐ DAD ☐ BOTH ☐ OTHER: _____

CHILD'S FIRST NAME	CHILD'S MIDDLE NAME	CHILD'S LAST NAME	JR.
CHILD'S DATE OF BIRTH	BORN – CITY & STATE	CHILD'S SOC. SECURITY #	AGE

CHILD IS CURRENTLY LIVING WITH: ☐ MOM ☐ DAD ☐ BOTH ☐ OTHER: _____

CHILD'S FIRST NAME	CHILD'S MIDDLE NAME	CHILD'S LAST NAME	JR.
CHILD'S DATE OF BIRTH	BORN – CITY & STATE	CHILD'S SOC. SECURITY #	AGE

CHILD IS CURRENTLY LIVING WITH: ☐ MOM ☐ DAD ☐ BOTH ☐ OTHER: _____

CHILD'S FIRST NAME	CHILD'S MIDDLE NAME	CHILD'S LAST NAME	JR.
CHILD'S DATE OF BIRTH	BORN – CITY & STATE	CHILD'S SOC. SECURITY #	AGE

CHILD IS CURRENTLY LIVING WITH: ☐ MOM ☐ DAD ☐ BOTH ☐ OTHER: _____

Any current or prior Court Cases regarding custody or visitation with the minor children? YES ☐ NO ☐

Explain: _____

Are there any Domestic Violence, TPO, Termination of Rights, or Adoption proceedings that could affect this Divorce? YES ☐ NO ☐

Explain: _____

Is there anyone who has physical custody of the children or claims legal rights to the children? YES ☐ NO ☐

Explain: _____

Day, Month, Year of Marriage: _____

Marriage Location (County, State, Country): _____

Is the Wife pregnant at this time? Yes ☐ No ☐

Is the Husband the Father of the unborn child? Yes ☐ No ☐ Date of expected birth: _____

REGULAR VISITATION AGREEMENT

Visitation duration must be very specific. Include the day, time, and place of the visitation exchanges.

Do not use the words "reasonable visitation" or "... the parents will decide between themselves..."

☐ Father or Mother works the 5, 4 mining schedule and will have custody of the minor children on his/her off days.

USE THE NEXT TWO PAGES HOLIDAY VISITATION

SCHOOL AGE CHILDREN- Parenting Timeshare and Holiday Schedule

No Visitation Requested Because: *(explain)*

Regular Schedule: <i>Be very specific. Include the times and days of the week for each parent's timeshare.</i> (ex.: <u>Mom</u> : Saturday 7pm – Wednesday 3pm, <u>Dad</u> : Wednesday 3pm – Saturday 7pm)	
Summer Schedule:	<input type="checkbox"/> Same as the regular schedule. <input type="checkbox"/> Other: _____
Mother's Day and Mother's Birthday:	<input type="checkbox"/> Mother every year from 9am – 7pm. <input type="checkbox"/> Other: _____
Father's Day and Father's Birthday:	<input type="checkbox"/> Father every year from 9am – 7pm. <input type="checkbox"/> Other: _____
Child's Birthday:	<input type="checkbox"/> <u>Even years</u> with (parent) _____ <input type="checkbox"/> <u>Odd years</u> with (parent) _____ *Time shall be from 9am – 7pm.* <input type="checkbox"/> Other: _____
3 Day Weekends:	<input type="checkbox"/> <u>Even Years</u> : MLK Jr. Day, Memorial Day, Labor Day with (parent) _____, President's Day, Independence Day, Nevada Admissions Day with the other parent. <input type="checkbox"/> <u>Odd Years</u> : MLK Jr. Day, Memorial Day, Labor Day with (parent) _____, President's Day, Independence Day, Nevada Admissions Day with the other parent. * Time begins when school lets out the day before the holiday weekend (or 3pm if no school), and ends the day following the holiday weekend when school resumes (or 9am).* ** If Independence Day falls on a Tuesday, Wednesday, or Thursday, the time shall be from July 3 at 9am until July 5 at 9am.** <input type="checkbox"/> Other: _____

Easter / Spring Break:	<input type="checkbox"/> <u>Even years</u> with (parent) _____ <input type="checkbox"/> <u>Odd years</u> with the other parent. * Time shall begin the day school lets out until noon the day before school resumes.* <input type="checkbox"/> Other: _____
Thanksgiving:	<input type="checkbox"/> <u>Even years</u> with (parent) _____ <input type="checkbox"/> <u>Odd years</u> with the other parent. * Time shall begin the day school lets out until noon the day before school resumes.* <input type="checkbox"/> Other: _____
Winter Break / Christmas:	<input type="checkbox"/> Segment 1 (Christmas) consists of the day school lets out until December 26 at noon. <input type="checkbox"/> Segment 2 (New Year's) consists of December 26 at noon until noon the day before school resumes. <input type="checkbox"/> <u>Even years</u> : segment 1 with (parent) _____, segment 2 with the other parent. <input type="checkbox"/> <u>Odd years</u> : segment 1 with (parent) _____, segment 2 with the other parent. <input type="checkbox"/> Other: _____
Other Holidays:	
Vacation:	<p>The parents will not establish a formal vacation plan, and will instead mutually agree on vacation days and times with the child(ren).</p> <p>Each parent may have up to (number) _____ vacation days per year with the child(ren). The parent shall notify the other parent of the vacation and provide a general vacation itinerary at least (number) _____ days before the planned vacation.</p> <p>Vacation time is not allowed during a holiday allotted to the other parent.</p>

YES NO

Parents will notify each other if they take their children out of state for 24 hrs or more.		
Parents shall keep each other updated on all childcare provider information.		
Each parent is entitled to reasonable telephone communication with the children.		
Parents shall share the expenses of their children's extracurricular and school activities equally (50/50).		
Upon receipt of information regarding the well-being of the children, each parent is to provide the other parent with the same info. (ie. Report cards, school meetings/notices, tests).		
Each parent is empowered to obtain emergency health care for the children without the consent of the other. Notification will be made ASAP of any emergency involving the child.		
Each parent shall have the right of first refusal to care for the children when the other parent is not available to care for the children for a period of six (6) hours or more.		
Both parents are to have equal access to all the children's medical records, school records, and any other records generated for the benefit of or on behalf of the children.		
The children are receiving Welfare / Medicaid.		
The children are receiving health insurance through the Father's employer.		
The children are receiving health insurance through the Mother's employer.		
The children are receiving health insurance through (other):		

Are there child support arrearages? If so, how much is owed: \$ _____

Father's gross monthly income is: \$ _____ **Mother's gross monthly income** is: \$ _____

The Father ☐ or the Mother ☐ will pay the other \$ _____ in child support each month.

CHECK ONE OF THE FOLLOWING

- ☐ There is already a child support action through the DA Office. Case No. _____
- ☐ The children are receiving Welfare benefits. The Welfare Department will prepare a child support case through the DA Office.
- ☐ The parent paying child support will pay the support directly to the receiving parent.
- ☐ Child support payments will be handled through the DA Office, and the parent receiving child support shall open a case with the DA Office. A wage assignment will be put into place immediately.

Father will claim the following children for tax exemption (child tax credit), and when	Mother will claim the following children for tax exemption (child tax credit), and when
1.	1.
2.	2.
3.	3.
EVERY EVEN TAX YEAR <input type="checkbox"/>	EVERY EVEN TAX YEAR <input type="checkbox"/>
EVERY ODD TAX YEAR <input type="checkbox"/>	EVERY ODD TAX YEAR <input type="checkbox"/>

DIVISION OF ASSETS

Check one of the following:

☐ All of the community assets and property have been previously divided, and each is to keep the property he/she has in his/her possession at this time.

☐ The community property should be divided as follows:

INCLUDE THE LAST FOUR (4) NUMBERS OF ACCOUNTS (RETIREMENT ACCOUNTS, IRAs, BANK ACCOUNTS, MUTUAL FUNDS, SAVINGS ACCOUNTS, ETC) AND ALL VIN NUMBERS TO VEHICLES, BOATS, ETC.

For example: **Washington Mutual Checking Account ending in 4566, 1996 F150 Ford truck, VIN 1234567890ABCD**

The Wife Shall Receive the Following Property:
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
USE SEPARATE SHEET OF PAPER IF YOU NEED TO LIST MORE ITEMS

The Husband Shall Receive the Following Property:
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
USE SEPARATE SHEET OF PAPER IF YOU NEED TO LIST MORE ITEMS

DIVISION OF DEBTS

- ☐ All of the community debts and property have been previously divided, and each is to keep those debts assigned to him/her and hold the other party harmless from those debts.
- ☐ There are no community debts to be divided.
- ☐ The community debts should be divided as follows:

Example: CREDIT CARD ACCOUNTS, BANK LOANS, AND PRIVATE LOANS

The Wife Shall Receive the Following Debts as her Sole and Separate Debt:
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
USE SEPARATE SHEET OF PAPER IF YOU NEED TO LIST MORE DEBTS

Husband Shall Receive the Following Debts as his Sole and Separate Debt:
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
USE SEPARATE SHEET OF PAPER IF YOU NEED TO LIST MORE DEBTS

SPOUSAL SUPPORT (ALIMONY)

Check one:

☐ The Petitioners hereby give up any right to spousal support or any other monetary claim each may have against the other for support or maintenance.

OR

☐ Wife ☐ Husband shall receive spousal support in the amount of \$_____ per (week/month) _____ due and payable on the (date due) _____ of each (week or month) _____ for a period of (number of weeks, months, years) _____. The spousal support shall begin on (date spousal support to begin) _____ and end on (date last spousal support payment will be made) _____.

RETURN TO FORMER NAME

The Wife's former full name: _____

OR

☐ The Wife chooses not to change her name.

RESIDENT WITNESS – Your resident Witness is someone 18 or older who will notarize an affidavit attesting that either the Husband or Wife is a bonafide Nevada resident. This person must also be a Nevada resident. This person can be a family member, friend, neighbor, co-worker, etc. This person does NOT see your Divorce. Residency requirement only needs to be established on ONE of the Petitioners (either the Husband or Wife, NOT both).

The full name of your Witness: _____

Your Witness is attesting which Petitioner is a Nevada resident (Circle One): **HUSBAND** or **WIFE**

Your Witness has been a Nevada resident for how many years: _____

Your Witness's Street Address: _____

City, State, ZIP: _____

Your Witness can attest the Petitioner has lived in the State of Nevada since when (mo/year): _____

Your Witness sees the Petitioner on the average of how many times per week: _____ (must be 3 or more days per week)

Your Witness's relationship to the Petitioner: _____ (friend, Mother, co-worker, etc.)