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CLIENT INTERVIEW FORM – CIVIL PROTECTION ORDER

At Petroff, Smitherman & Associates, we pride ourselves on giving each client a comprehensive and personalized consultation experience. This often necessitates a thorough review of the details of your case, and our attorneys wish to provide you with the best legal advice given the circumstances of your matter. Please complete as much of the below questionnaire as time allows in advance of your consultation. In the event that the questionnaire cannot be completed prior to the consultation, it can be submitted when you are ready to proceed with your case.

140 East Town Street, Suite 1070, Columbus, OH 43215 | Tel: (614) 222-4288 | Fax: (614) 222-4289

I. Client and Other Party Information

General Information:

<u>Client</u>	Other Party
Full Legal Name	Full Legal Name
Home Address	Home Address
City, State, Zip	City, State, Zip
County	County
Telephone (home)	Telephone (home)
Telephone (work)	Telephone (work)
Relationship to Other Party	Work Days/Hours
Telephone (cell)	Telephone (cell)
Email address	Email address
Social Security Number	Social Security Number
Date of Birth / Age	Date of Birth / Age
Driver's License No	Driver's License No
	Car Make/Model/Color/Year
Social Media Handles:	Social Media Handles:
Facebook	Facebook
Twitter:	Twitter:
Instagram:	Instagram:
Employment Information:	
Current Employer	Current Employer
Employer Address	Employer Address
City, State, Zip	City, State, Zip
Position/Title	Position/Title

Additional Information on Respondent					
Sex: Race: Height:	Weight:	Age:			
Color of Eyes: Color of Hair:					
Other Physical Characteristics:					
Does Respondent Abuse Drugs/Alcohol?	_ Have Violent Tend	dencies?			
Carry/Own Weapons? If So, 1	Гуре of Weapon?				
Where are the weapons kept?					
Do you know of any outstanding warrants for responder	nt?				
If so, what are the warrants for?					

PLEASE COMPLETE THE FOLLOWING SECTION ONLY IF APPLICABLE TO YOUR CASE**

II. Children of This Relationship

A. Insert the information requested below for all minor or dependent children of this relationship. List the residences for all places where the children have lived for the last FIVE years.

1. Child's Name:		Place of Birth:	
Date of Birth:	Check if	Sex: Male Female Person(s) With Whom Child Lived	
Period of Residence	<u>Confidential</u>	(name & address)	<u>Relationship</u>
to present	☐ Address Confidential?		
to	☐ Address Confidential?		
to	Address Confidential?		
to	Address Confidential?		
2. Child's Name:		Place of Birth:	
Date of Birth:		Sex: 🗌 Male 🗌 Female	
Period of Residence	Check if <u>Confidential</u>	Person(s) With Whom Child Lived (name & address)	<u>Relationship</u>
to present	☐ Address Confidential?		
to	Address Confidential?		

to to	☐ Address Confidential? ☐ Address Confidential?		
3. Child's Name:		Place of Birth:	
Date of Birth:	Check if Confidential	Sex: Male Female <u>Person(s) With Whom Child Lived</u> (name & address)	Relationship
1	Address	· · · · ·	

B. Background Questions Relating to Your Minor Child(ren):	

Confidential?

Confidential?

Confidential?

Confidential?

to

to

to

to

present

1. Have you ever participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of, or visitation (parenting time), with any child subject to this case?

2. Do you have any information about any other civil cases that could affect the current case, including any cases relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations or adoptions concerning any child subject to this case?

3. List all of the criminal convictions, including guilty pleas, for you and the members of your household for the following offenses: any criminal offense involving acts that resulted in a child being abused or neglected; any domestic violence offense; any sexually oriented offense; and any offense involving a victim who was a family or household member at the time of the offense and caused physical harm to the victim during the commission of the offense

4. Do you know of any persons *not* a party to this case who has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this case?

5. Please identify any special issues or concerns regarding the children_____

7. If the parties have separated, who are the children living with?_____

Please provide any other pertinent information regarding your matter below:

<u>Please review the below list of suggested items our firm will require should you choose to move forward with your matter.</u>

____Court pleadings and documents from current case

- ____Any police reports pertaining to your matter
- ____All supporting text messages, photos, and emails regarding your case