

BERRIEN COUNTY FRIEND OF THE COURT  
811 PORT STREET, ROOM 301  
ST. JOSEPH, MICHIGAN 49085  
TELEPHONE: (269) 983-7111, ext. 8575

INVESTIGATOR \_\_\_\_\_  
FILE NO. \_\_\_\_\_  
ATTORNEY \_\_\_\_\_

**PARENT QUESTIONNAIRE  
CHANGE OF PARENTING TIME**

**PLEASE COMPLETE AND CAREFULLY ANSWER EACH QUESTION WHICH PERTAINS TO YOU.**  
**THIS FORM WILL BE USED AS A GUIDELINE IN YOUR PENDING CASE.**

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone No: \_\_\_\_\_ Cell No. \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's Telephone No: \_\_\_\_\_ Gross Earnings Per Week: \_\_\_\_\_

Hourly Rate: \_\_\_\_\_ Hours Worked Per Week: \_\_\_\_\_

Please describe your home. List each room and where each family member sleeps. \_\_\_\_\_

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Who resides in your home (adults & children)? Please list first and last names, ages and how each person is related to you. \_\_\_\_\_

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What is your monthly rent or mortgage payment? \_\_\_\_\_

List addresses you have resided at since the last Court Order was granted. \_\_\_\_\_

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Please describe why your home is a good environment for parenting time. \_\_\_\_\_

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What has changed since the last Court Order that led to a change in parenting time petition? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you married since the last Court Order? If so, what is your spouse's first name and on what date did you marry? \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_

Spouse's Occupation: \_\_\_\_\_ Gross Earnings Per Week: \_\_\_\_\_

Does your spouse pay child support on any other cases? If so, what amount is paid per month? \_\_\_\_\_

If you are not married are you currently dating or involved in a relationship with someone else? If so, list their name, address and telephone no. \_\_\_\_\_  
\_\_\_\_\_

Do you have any current health problems? If so, list the problem and the name and address of the doctor whose care you are under. \_\_\_\_\_  
\_\_\_\_\_

Have you ever seen or are you presently seeing a counselor, psychiatrist or psychologist? If so, please give the name of the person and the dates on which you were seeing them. \_\_\_\_\_  
\_\_\_\_\_

Have you ever been arrested? If yes, give dates, charges, location and outcome of the arrest. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been involved with Probate Court or the Department of Human Services regarding the physical or sexual abuse of any child? Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the present parenting time arrangement? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Has the parenting time arrangement changed since the last Court order? If so, was this through a Court Order or an agreement between you and the other parent? \_\_\_\_\_**

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**What do you feel parenting time should be? Please state exact days, times, holidays, summer and transportation arrangements. \_\_\_\_\_**

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**Why do you feel this would or would not be beneficial to your children? \_\_\_\_\_**

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**Do the children attend Church or Sunday School? Where? Who takes them? How often do they attend? \_\_\_\_\_**

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**Has there been any domestic violence between you and the other parent since the last Court Order? If yes, please give dates, location, brief description of what happened and whether the police were involved. \_\_\_\_\_**

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