



## INDEPENDENT CHILDREN'S LAWYER QUESTIONNAIRE

COMPLETED BY:	MOTHER	FATHER	OTHER
FULL NAME:	_____		
YOUR ADDRESS:	_____		
	SUBURB: _____	STATE: _____	POSTCODE: _____
SIGNATURE:	_____		

Thank you for taking the time to complete this questionnaire. It will assist Ms Justine Bowman, the Independent Children's Lawyer, to understand more about the children and so that their interest can be represented in your family law court proceedings.

The information provided on this questionnaire may be provided to professionals involved in your matter such as Psychologists and Family Report writer's.

### CHILDREN'S DETAILS

CHILD'S NAME	GENDER	DATE OF BIRTH	AGE	WHO DOES THE CHILD LIVE WITH?

**ECHUCA VIC 3564**  
 209A Anstruther Street,  
 P.O. Box 1348  
 DX: 62521 Echuca  
**Telephone: (03) 5482 4003**  
 Facsimile: (03) 5482 4006

Email: [admin@jolimanlawyers.com.au](mailto:admin@jolimanlawyers.com.au)  
 Website: [www.jolimanlawyers.com.au](http://www.jolimanlawyers.com.au)  
 Principal: Justine Bowman LLB Dip LP  
 ABN: 49 695 421 992

**COHUNA VIC 3568**  
 1A Cullen Street  
 PO Box 481  
**Telephone: (03) 5456 3335**  
 Facsimile: (03) 5456 3336

**1 Please print your name**

Provide any other/former names

**2 Your date of birth**

 /  / 

**3 Were you born in Australia?**

Yes  

No  

**4 If not, where were you born and when did you start living in Australia?**

Country
Date started living in Australia / /

**5 Are you an Aboriginal or Torres Strait Islander?**

Yes  

No  

**Living arrangements**

**6 Where does your child spend most of their time living? (Full address including Post code)**

Address
Postcode

How much time does the child spend at this address per week?  
 Hours or  days or  nights

**7 How long has this been your child's main address?**

Years  Months

P

**8 Who else lives at or has lived, or spends substantial time, at that address with your child?**

Name
Date of birth / /
Relationship to that child
Name
Date of birth / /
relationship to that child
Name
Date of birth / /
Relationship to that child

**9 Do you have a partner or another person important to you that you wish to spend time with your child?**

**If so, please give their details:**

Name
Date of birth / /
Relationship to child, if any
What amount of time do you seek?

**10 If your child has been at this main address for less than two years, please give details of each other address at which your child has spent substantial time during the last two years?**

Address
Postcode
Dates: / / to / /
Others who spent substantial time with your child at that address
Relationship to child

Address
Postcode
Dates: / / to / /

Others who spent substantial time with your child at that address
Relationship to child

**11** If your child does not live at your address, how much time do you spend with them per week or month?  
 Hours or  days or  nights

**Siblings and step-siblings**

**12** Do you have children from any other relationship?  
 If so, please give details:

Name
Date of birth / /
Where is a child living:
Postcode
If not living with you, what contact do you have?

Name
Date of birth / /
Where is a child living:
Postcode
If not living with you, what contact do you have?

**Childcare and school**

**13** Please give name and address of any Day-care Centre, carer, pre-school or schools that your child now attends?

Name
Address
Postcode
Telephone
Date commenced / /

Name
Address

Postcode
Telephone
Date commenced / /

Name
Address
Postcode
Telephone
Date commenced / /

**14** please give names and addresses of any day-care centres, carers, pre-schools or schools that your child has attended in the last two years and the approximate date they started their:

Name
Address
Postcode
Telephone
Date commenced / /

Name
Address
Postcode
Telephone
Date commenced / /

Name
Address
Postcode
Telephone
Date commenced / /

Name
Address
Postcode
Telephone
Date commenced / /



Telephone
Reason for attendance
Date attended / /
Approx. date (if exact date is unknown): / /
Name
Address
Postcode
Telephone
Reason for attendance
Date attended / /
Approx. date (if exact date is unknown): / /

Reason for contact
Date of contact / /
Approx. date (if exact date is unknown): / /

## Current court orders

**19** Are there any court orders relating to the child, either Family, Federal Circuit, Magistrates' and/or Children's Court in Victoria or any other state, which were made before or after the present proceedings started? If so, please give details or attach a copy of the orders:

Court
Details
Date of order / /
Approx. date (if exact date is unknown): / /

Court
Details
Date of order / /
Approx. date (if exact date is unknown): / /

## Police or child protection involvement

**18** Do you know if there has been any contact with the police or the Department of Human Services or any other state welfare authority about any of your children?

If so, please give the names of any police or welfare officers, which office(s) were involved and the approximate dates:

Name
Office
Address
Postcode
Telephone
Reason for contact
Date of contact / /
Approx. date (if exact date is unknown): / /

Name
Office
Address
Postcode
Telephone

## Family violence

**20** Are there any family/domestic violence orders made in Victoria or any other state, involving yourself, the other party/parties and the child? If so, please give details and attach a copy of the orders:

Court
Details



Date