County #	Providers Initials	Today's Date://				
Site #	Petition #/Family ID	Family ID EXHIBIT E: A				
OF THE CO	CRATIVE OFFICE OURTS  MILIES, CHILDREN	Access to Visitation		ıram		
1926 & THE COURTS		n-Custodial Parent)				
1. Start Date of Access t	o Visitation Service: //					
2. Gender: $\square$ Male $\square$ F	Female	6. Ethnic backgro	und:			
3. Date of birth:	//	☐ American Indian ☐ Asian				
4. Relationship to child(r	ren):	☐ Black or African	American			
☐ Custodial mom		☐ Hispanic or Latin	☐ Hispanic or Latino			
☐ Non-custodial mom	1	☐ Native Hawaiian	or other Pacific Isla	nder		
☐ Custodial dad		☐ White (non-Hispanic)				
☐ Non-custodial dad		☐ Two or More Races				
☐ Grandparent —		☐ Don't know				
☐ Legal guardian		☐ Refused				
into program):  ☐ Married, (living in the	·	7. Is this parent al	ole to receive sei	vices in English?		
<ul> <li>☐ Separated, (still legally married to each other but living in separate households)</li> <li>☐ Divorced, (people who have received a legal divorce from each other)</li> </ul>		8. What language is this parent most comfortable speaking?				
☐ Unmarried, (never i	married to each other)	☐ English	☐ Hmong	☐ Other		
☐ Don't know		☐ Spanish	☐ Japanese	☐ Don't know		
Refused		☐ American Sign ☐ Armenian	☐ Korean ☐ Mandarin	L Don't know		
5.b. Cohabitating relationship with child(ren)'s other		☐ Cambodian	☐ Tagalog			
parent:		☐ Cantonese	☐ Vietnamese			
☐ Never lived togethe			_ violatameco			
☐ Lived together in th	·	9. Are services provided in the language the parent				
☐ Live together at this	s time	is most comfort	able speaking?			
☐ Don't know		☐ Yes ☐	□ No			
☐ Refused		10. Does this pare	ent pay or receive	e child support?		
				• •		
		⊔ Yes, the	parent pays child su	upport		

☐ Don't know

 $\square$  Yes, the parent <u>receives</u> child support

support Refused

 $\square$  No, the parent <u>does not</u> pay nor receive child

County #	Providers Initials	Today's Date: //
Site #	Petition #/Family ID	EXHIBIT E: ATTACHMENT 7
11. Is this parent of support?	ordered to pay or receive child	
☐ Yes, the	parent is ordered to pay child support	
☐ Yes, the	parent is ordered to receive child support	
☐ No, the p child sup ☐ Don't kn ☐ Refused		
12. Individual annual i	income before taxes (Including all e):	
☐ No Income	□ \$30,000- \$39,999	
☐ Less than \$10,000	☐ \$40,000 or above	
□ \$10,000 - \$19,999	☐ Don't know	
\$20,000 - \$29,999	☐ Refused	
	is program raise any concern for their safety or their child(ren)'s	
☐ Yes		
□ No		
☐ Don't know		
14. Actual End Date of	Access to Visitation Service:	
15. Reason for ending	service:	
☐ Mutual agreemen	t	
☐ Completed progra	am	
☐ Could not afford it	i e	
☐ Failure to comply	with center rules	
(if yes) ☐ Safety was a	n issue	
☐ Dropped out		
☐ Don't know		
☐ Grant fund ended		
Other		

County # Providers		•	//	/		
Site # Petition #						
Parent 2 (Custodial Parent)						
16. Start Date of Access to Visit	tation Service /					
<b>17. Gender:</b> $\square$ Male $\square$ Female						
18. Date of birth: / /		22. Is this parent a	ble to receive se	ervices in		
19. Relationship to child(ren):		English?				
☐ Custodial mom		☐ Yes ☐	No			
☐ Non-custodial mom						
☐ Custodial dad		23. What language comfortable s		nost		
☐ Non-custodial dad		Connortable 5	peaking :			
☐ Grandparent		☐ English	☐ Hmong	☐ Other		
☐ Legal guardian		☐ Spanish	☐ Japanese	☐ Don't know		
20.a. Marital status with child's	other parent	☐ Spanish ☐ American Sign	☐ Sapanese	□ Don't know		
(upon entry into progran	<u>-</u>	☐ Armenian	☐ Mandarin			
☐ Married, (living in the same	household)	☐ Cambodian	☐ Tagalog			
☐ Separated, (still legally mar	rried to each other but	☐ Cantonese	☐ Vietnamese			
living in separate househol	ids)	□ Cantonese	□ vietilailiese			
☐ Divorced, (people who have	e received a legal	24. Are services p	rovided in the la	nguage the		
divorce from each other)			comfortable sp			
☐ Unmarried, (never married	to each other)		7			
☐ Don't know		∐ Yes L	J No			
☐ Refused		25. Does this pare support?	nt pay or receive	e child		
20.b. Cohabitating relationship	with child(ren)'s	_				
other parent:		☐ Yes, the	parent <u>pays</u> child s	upport		
☐ Never lived together		☐ Yes, the	parent <u>receives</u> chi	ld support		
Lived together in the past		□ No the n	arent does not pay	nor receive		
Lived together at this time		child sup		1101 1000110		
☐ Don't know		☐ Don't kno	•			
☐ Refused		☐ Refused				
		□ Reiuseu				
21. Ethnic background: (check a	all that apply)	26. Is this parent of		r receive		
☐ American Indian or Alaskar	n Native	child support?	•			
☐ Asian		$\square$ Yes, the	parent is <u>ordered to</u>	pay child		
☐ Black or African American		support				
☐ Hispanic or Latino		☐ Yes, the	parent is <u>ordered to</u>	receive child		
☐ Native Hawaiian or other P	acific Islander	support				
☐ White (non-Hispanic)		☐ No, the p	arent is not ordered	<u>d</u> to pay nor		
☐ Two or More Races			e child support	-		
☐ Don't know ☐ Don't know						
☐ Refused	☐ Refused ☐ Refused					

	Providers Initials	roday's Date:	 
Site #	Petition #/Family ID		
	nual income before taxes I sources of income):		
(	· · · · · · · · · · · · · · · · · · ·		
☐ No Income	□ \$30,000- \$39,999		
☐ Less than \$10,	,000		
□ \$10,000 - \$19,			
□ \$20,000 - \$29,	,999 ☐ Refused		
	g to this program raise any the parent about their safety or en)'s safety?		
☐ Yes			
☐ Yes ☐ No			
_	,		
☐ No☐ Don't know	ate of Access to Visitation		
☐ No ☐ Don't know 29. Actual End Da Service:			
☐ No ☐ Don't know 29. Actual End Da Service:	ate of Access to Visitation		
□ No □ Don't know  29. Actual End Da Service: □ _ / _	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □ □ / □  30. Reason for e	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □ □ / □  30. Reason for e □ Mutual agre	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □ □ / □  30. Reason for e □ Mutual agre □ Completed □ Could not a □ Failure to co	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □ □ / □  30. Reason for e □ Mutual agre □ Completed □ Could not a □ Failure to co	ate of Access to Visitation /		
□ No □ Don't know  29. Actual End Da Service: □	ate of Access to Visitation  /		
□ No □ Don't know  29. Actual End Da Service: □	ate of Access to Visitation /		

County #	Providers Initials	_	Т	oday's Date:	/	/	
Site # Petition #/Family ID							
31. Re	eferral source:						
☐ Co	ourt order (e.g. judicial officer) or family court se	ervices (e	e.g. media	tor, evaluator) or .	Judicial C	ouncil Forn	n Go to q. 32
□ s	elf-referral				7		
☐ Ti	itle IVD (Child Support Case)/Family Law Faci	litator/Lo	cal Child S	Support Agency	0- 4-		
$\square$ N	on-profit agency				Goto	q. 33	
☐ A:	ttorney						
□с	hild Abuse Agency						
	omestic Violence Agency						
	on't know				_		
□ о	ther						
32a I	Reason for referral: (check all that apply						
	(check an arat apply	,					
		P1	P2				
С	hild abuse allegations or history						
	Child sexual abuse						
	Child physical abuse						
С	hild emotional abuse allegations or history						
C	Child neglect allegations or history						
	omestic violence allegations or history  f yes)						
	Child resided in household where domestic violence was perpetrated						
P	arenting concerns (allegations or history)						
	bduction risk (threatened or attempted dnapping)						
	ubstance abuse allegations or history f yes, please specify)						
	Alcohol						
	Psychoactive drugs						
	Prescription drugs						
М	lental illness						
Lá	ack of access						
	eintroduction/lack of contact						
	other						
D	on't know (court order does not specify eason for referral)						

County # Providers Initials	Today's Date: //
Site # Petition #/Family ID	
32b. Court order history from Form FL-341(A):	
1) Date of Initial Order:	
Service Type (Check all that apply):	
□ sv □ se	
Duration of each session: hours;	
Frequency: hours per week;	
Duration of the order weeks total	
☐ Order does not specify	
☐ Further order of the court	
2) Date of Modification:	
Service Type (Check all that apply):	
□ SV □ SE	
Duration of each session: hours;	
Frequency: hours per week;	
Duration of the order weeks total	
☐ Order does not specify	
☐ Further order of the court	
☐ Missing Order Info (from FL-341(A))  ↓	
33. Is there any restraining order in effect now the having any contact with the other?	nat prevents one parent from coming near or
Against P1	ow
Against P2	now

	Site #	Petition #/Far	mily ID	<u></u>			
Child Information							
	34. Child #1	35. Child #2	36. Child #3	37. Child #4	38. Child #5	39. Child #6	
a. Date of birth:							
b. Gender:	☐ Female	☐ Female	☐ Female	☐ Female	☐ Female	☐ Female	
	☐ Male	☐ Male	☐ Male	☐ Male	☐ Male	☐ Male	
40. Total number of children receiving services							
Other Info	rmation						
41. Is there ar	nyone else (in addition	n to the parents and ch	ildren listed in this forn	n) designated to pick-u	p/drop-off or visit with t	the child(ren)?	
□ No							
☐ Yes <b>→ 41.</b> k	o. What is their relatio	nship with the child? _					

County # \_\_\_\_\_ Providers Initials \_\_\_\_ \_

Today's Date: \_\_\_\_ /\_\_\_ /\_\_\_