Your Solution your Way

### **Preliminary Information Form**

Please give us the following preliminary information before your initial meeting. Although not everything might be relevant to your case, please give us as much information as possible. Any information you provide will not be shared without your express permission, will be securely stored and destroyed in line with our Privacy Policy.

#### 1. Your personal details

Full name		Surname at Birth (if different)			
Date of birth		Place of birth			
Home address					
		Email			
What is your N	ational Insurance numb	er?			

How would you like us to contact you? Post / Email

#### 2. Relationship details

Date of marriage	Date you started living toget	her		•••••
Date of separation (if appropriate)				
If living together, do you wish to consider s	eparation?	Yes	No	Not Sure
Do you think that the relationship has broke	en down permanently?	Yes	No	Not Sure
Have you and your husband/wife discussed	d divorce?	Yes	No	Not Sure
If so, have you reached any agreement abo	out divorce?	Yes	No	Not Sure

#### 3. The other person's details

Full name	Surname at Birth (if different)	
Date of birth		
Home address		
Tel (H) T	el (M) Email	

### 4. Confidentiality

Do you need to keep an address, email or telephone number kept confidential?	Yes	No	Not Sure



Your Solution your Way

#### 5. Children

Please give the following information about children you have together, or from another relationship: **1st child:** 

Name	Date of birth	
If relevant, school, college or University		
Any special needs? If so, please give brief details		
2nd child:		
Name	Date of birth	
If relevant, school, college or University		
Any special needs? If so, please give brief details		
3rd child:		
Name	Date of birth	
If relevant, school, college or University		
Any special needs? If so, please give brief details		
Please continue on a separate page if there are more th	an three children	

Who are the children currently living with?		•••••			
If you are separated from the other parent, do the children have o	contact wi	ith him/h	er?	Yes	No
If the children live with the other parent, do you have contact with	h them?			Yes	No
Do you have Parental Responsibility for the children?	Yes	No	Not S	Sure	
Is Parental Responsibility an issue?	Yes	No	Not S	Sure	
Are the children aware of the situation between you and your hus	band/wife	e/partner	? Yes	No	Not Sure

#### 6. Do you care for other people, or have any other dependants?

Name		Date of birth	
Address			
Any speci	al needs? If so, please give brief details		

#### 7. Preliminary financial outline (if this is something you wish to discuss)

If you need to discuss money issues, please tell us a little bit about your financial situation. We will need detailed information from you as your case progresses, and we will talk this through as we go.

lf you own or jointly ow	/n a property, p	please give the a	address (if diffe	erent froi	m quest	ion 1)	
Is this where you and y			Ū.		Yes	No	Not Sure
Do you rent or own the	e place that you	l live in?	Rented	Owned			
In whose name is it?	Joint	Sole	Whose sole na	ame?			



If owned, estimated current value £ ..... and mortgage balance £ .....

What is your occupation? Current salary - gross/year £ net/month £
If employed, name of employer
If self-employed or in partnership, estimate of current annual earnings – gross £
To what date are accounts available?

Do you have any other sources of income, e.g. rental, Universal credit, maintenance, child benefit? Please give amounts, frequency and type .....

#### 8. Professional representation and support

Are you represented by a solicitor? If so, what is the	heir name and address?
	to the relationship problems? If so, from whom? Was it
Are you still having counselling or therapy?	Yes No
Would you like us to recommend someone?	Yes No
Have any other professional services been involve	ed with your family e.g. Social Services? If so, please indicate
who, when and what for	

#### 9. Legal and Other Proceedings

Have any court proceedings started, such as divorce or child related matters? If so, what for, in which court, and
what stage has been reached?
Is there a hearing date for any proceedings? If so, when and where?

Has a Child Support Assessment or maintenance order been sought or made for your children? If so, please give
details
Has any court order been made, sought or threatened to protect any member of the family or their property? If so, please give details



Your Solution your Way

#### 10. Outline of issues for discussion

Do you feel able to speak freely in the meeting?

Might you want talk about any of the following? This won't limit what you can discuss, you can still add to the list:

Future of the relationship	Yes	No	Not Sure	
Arrangements for separation	Yes	No	Not Sure	
Review of existing agreement or order	Yes	No	Not Sure	
Parental responsibility for children	Yes	No	Not Sure	
Any other issues concerning children	Yes	No	Not Sure	
Financial/property issues	Yes	No	Not Sure	
Any question of behaviour, threat or abuse	Yes	No	Not Sure	
Communication skills, to help in difficult times	Yes	No	Not Sure	
Some meetings might be held with both parties together.				
Does this create any concerns for you?		Yes	No	Not Sure

If you have any concerns about behaviour, threat or abuse, we may need more information, so that we can be sure to keep everyone safe and supported while you are with us.

Yes

No

Not Sure

#### 11. Your aims

Please would you say what your aims are. We appreciate that you may need to know more from us, but it would help to have some preliminary idea of what you hope to achieve in broad terms, not in detail. Please do not provide information or send copies of correspondence at this stage. In terms of confidentiality, the initial assessment is private and we will tell you what the rules are for any further meetings, which depends upon which route you choose.

Signed

..... Date

••••••

