# CONFIDENTIAL

#  PERSONAL DATA AND INFORMATION

|  |  |
| --- | --- |
| PERSON 1 | PERSON 2 |
| First Name:  | First Name:  |
| Middle Name:  | Middle Name:  |
| Last Name:  | Last Name:  |
| Cell Phone:  | Cell Phone:  |
| Work Phone:  | Work Phone:  |
| E-Mail:  | E-Mail:  |
| Address:  | Address:  |
| City, State: Rochester, New York | City, State: Rochester, New York |
| Zip Code:  | Zip Code:  |
| County:  | County:  |
| Employer Name:  | Employer Name:  |
| General Health:  | General Health:  |
| Birth Date:  | Birth Date:  |
| Birthplace:  | Birthplace:  |
|  | Maiden Name:  |
| Education:  | Education:  |
| Marriage: 1st [x] 2nd [] 3rd [] | Marriage: 1st [x] 2nd [] 3rd [] |
| Date of Marriage:  |  |
| Religious Ceremony [] Civil Ceremony [] |  |
| City:County: State of Ceremony: New York |  |
| Children of this Marriage: | Child’s Date of Birth/Child’s Health |
|  |  |
|  |  |
|  |  |

 *Please note*: We want this process to be as smooth as humanly possible for you. Please email me if you have any questions and I will get back to you within a reasonable time. There are multiple documents to be sent via email to both of you, to help you understand he process, organize it in your head and proceed faster. The more you can resolve with your partner outside my office, the more money and time you save. My website also has helpful hints and links to [www.Archive.org](http://www.Archive.org) for my spoken voice and hints to make the process less painful. Additionally, I have books in the office you can reference for parenting plan, divorce and money and estate planning etc..

1. Children (if you have a custody arrangement, please provide details under ‘Residing With’)

Full Name Date of Birth Residing With

Any health issues with any of the children? \_\_\_Yes \_\_\_No

Are you currently paying support for these children? \_\_\_ Yes \_\_ No

Are you currently paying alimony to current Spouse?\_\_\_\_ Yes \_\_ No

1. Children of Previous Marriage/Relationship

 Full Name Date of Birth Residing With

Are you currently paying support for these children? \_\_\_ Yes \_\_\_ No

Are you currently paying alimony to a former spouse? \_\_\_\_ Yes \_\_\_\_ No

1. Are you and your current partner living together now? \_\_ Yes \_\_\_ No

Date of separation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Other than your children and/or your spouse, are there any people living with you now? \_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

If yes, list their names and their relationship to you.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you both employed? \_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_ No

Address of Person 1’s employer:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Job \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Hired \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Salary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Person 2’s employer:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Job \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Hired \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Salary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do the two of you have an interest in reconciliation? \_\_\_ Yes \_\_\_ No
2. Are either of you presently seeing a counselor or therapist? \_\_\_ Yes \_\_ No

If yes, \_\_\_\_\_\_ Individual \_\_\_\_\_\_\_\_ Joint \_\_\_\_\_\_\_\_ Family

Please list name of counselor or therapist\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have you previously seen a counselor or therapist? \_\_\_ Yes\_\_\_\_ No

If yes, \_\_\_\_\_\_ Individual \_\_\_\_\_\_ Joint \_\_\_\_\_\_\_\_ Family

For the next few questions, if you anticipate a dispute, please consider your side of the equation and how you contributed to the dispute in the past (if applicable) and how you want to change. While this is a tough time to put yourself in the other person’s shoes (empathy), we will ask you to do that. Please put yourself in your children’s shoes and how it might feel to watch your parents being hostile about a dispute. Imagine watching your parents say cruel things, intentionally hurting one another and the lasting impact of that on the children. It is okay to have the dispute and to disagree and to have strong feelings. How you express them is vital. Please come with being aware of your needs, possible solutions, making sure that your needs are met without trampling the needs of your partner. Ideally, it is not only a win-win, but the best possible win-win-win.

1. Do you anticipate a dispute about custody of the children?

\_\_\_Yes \_\_\_No

1. Do you anticipate a dispute about child support payments?

\_\_\_\_\_ Yes \_\_\_\_\_ No

1. Do you anticipate a dispute about the division of debt (if applicable)? \_\_\_\_\_ Yes \_\_\_\_\_ No
2. Do you anticipate a dispute about the marital home (if applicable)? \_\_\_\_\_ Yes \_\_\_\_\_ No
3. Do you anticipate a dispute about the division of other assets or property? \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Do you anticipate a dispute about the marital home (if applicable)? \_\_\_\_\_ Yes \_\_\_\_\_ No

15. Do you anticipate a dispute about particular items or issues?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list subjects of anticipated dispute:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Do you presently have a lawyer representing only you?

Yes \_\_\_\_\_\_ No \_\_\_\_\_\_

If yes, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Address Phone

17. How did you learn about us?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_