

SONOMA COUNTY FAMILY LAW FACILITATOR

INTAKE FORM

TELL US ABOUT YOU:

First Name(s): Middle Name(s):
Last Name(s):

Address:

City: State: Zip Code:

Telephone: E-mail:

TELL US ABOUT THE OTHER PARTY (SPOUSE/OTHER PARENT/PERSON TO BE RESTRAINED/PERSON TO BE CONSERVED):

First Name(s): Middle Name(s):
Last Name(s):

Address:

City: State: Zip Code:

Telephone: E-mail:

TELL US ABOUT ANY CHILDREN INVOLVED:

There are no children involved.

Child 1

First Name(s): Middle Name(s):
Last Name(s):

Date of Birth:

- This is my child with the other party. This is my child from a previous relationship.
 This is not my child, but I want to be his or her guardian.

Child 2

First Name(s): Middle Name(s):
Last Name(s):

Date of Birth:

- This is my child with the other party. This is my child from a previous relationship.
 This is not my child, but I want to be his or her guardian.

Child 3

First Name(s):
Last Name(s):

Middle Name(s):

Date of Birth:

- This is my child with the other party. This is my child from a previous relationship.
 This is not my child, but I want to be his or her guardian.

DO YOU HAVE AN EXISTING FAMILY LAW CASE INVOLVING THE OTHER PARTY?

- Yes,
Case Number:
County:
 No.

HOW CAN WE HELP YOU?

- I need blank forms and filing instructions for (check all that apply):

Divorce

- Starting a case. Responding to papers. Finishing a case.

Parentage

- Starting a case. Responding to papers. Finishing a case.

Is the Department of Child Support Services involved in your case?

- Yes. No.

Child Custody & Visitation

- Starting a case. Responding to papers. Changing the current orders.

Were you and the other parent ever married?

- Yes. No.

Child Support

- Starting a case. Responding to papers. Changing the current orders.

Is the Department of Child Support Services involved in your case?

- Yes. No.

Spousal Support

- Starting a case. Changing the current orders.

Temporary Restraining Order

- Requesting. Responding to papers.

If requesting, how do you know the person you want restrained?
(Check all that apply.)

- We are or used to be married or registered domestic partners.
 We are or used to be engaged.
 We are or used to be dating.
 We are the parents of a child or children under 18.
 We live together.
 We used to live together.
 We are related by blood, marriage or adoption (specify relationship):
 Other (specify):

Guardianship

- Requesting. Objecting. Terminating.

If requesting, please provide the names of the child or children's parents:

Parent 1

First name(s): Middle name(s):
Last name(s):

Parent 2

First name(s): Middle name(s):
Last name(s):

If requesting, please provide the name of the child or children's current guardian, if any:

First name(s): Middle name(s):
Last name(s):

Limited Conservatorship

- Requesting. Objecting. Terminating.

Stepparent Adoption

Name Change

Other:

I would like someone to review my completed forms before I file them.

I have procedural questions about a family law issue:

**HAVE YOU PREVIOUSLY RECEIVED ASSISTANCE FROM
THE
FAMILY LAW FACILITATOR?**

Yes.

No.

**DID YOU LOOK ONLINE FOR LEGAL INFORMATION
BEFORE COMPLETING THIS INTAKE FORM?**

Yes.

No.

TO SUBMIT THIS INTAKE FORM:

- 1. Save a copy of this completed form to your computer. Right-click on the completed form, select "save as" and select the location on your computer where you would like to save it.**
- 2. Attach the completed intake form, along with any completed legal forms you would like reviewed, in an e-mail to: familylawfacilitator@sonomacourt.org. Click "attach file" find the location on your computer where you saved the completed intake form, and double-click the saved intake form.**