Child Protective Services (CPS) Worksheet



The following form is designed to help us to better litigate your Child Protective Services (CPS) case.

Your answers will help determine whether we can assist with your case, and if we can, it will help reduce attorney fees by limiting the number of questions we need to ask in person. It is very important that you answer this worksheet **HONESTLY**, **ACCURATELY**, and **COMPLETELY**.

If you believe that a question does not apply to your case, please mark the question "N/A." If the answer to any question requires more space than has been provided on the form, please complete your answer on a separate sheet.

NOTICE OF CONFIDENTIALITY

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY-CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF EVIDENCE. HOWEVER, IF A PROFESSIONAL, INCLUDING AN ATTORNEY OR AN EMPLOYEE OF AN ATTORNEY, HAS CAUSE TO BELIEVE THAT A CHILD HAS BEEN ABUSED OR NEGLECTED OR MAY BE ABUSED OR NEGLECTED OR THAT A CHILD IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE, AND THE PROFESSIONAL HAS CAUSE TO BELIEVE THAT THE CHILD HAS BEEN ABUSED AS DEFINED BY SECTION 261.001 OR 261.401 OF THE TEXAS FAMILY CODE, THE PROFESSIONAL SHALL MAKE A REPORT NOT LATER THAN THE FORTY-EIGHTH HOUR AFTER THE HOUR THE PROFESSIONAL FIRST SUSPECTS THAT THE CHILD HAS BEEN OR MAY BE ABUSED OR NEGLECTED OR IS A VICTIM OF AN OFFENSE UNDER SECTION 21.11 OF THE TEXAS PENAL CODE. THE REPORT SHALL BE MADE TO THE APPROPRIATE AGENCY.

THE CONTENTS OF THIS DOCUMENT MAY CONSTITUTE ATTORNEY WORK PRODUCT, ARE CONFIDENTIAL, AND ARE NOT TO BE DISCLOSED TO THIRD PERSONS OTHER THAN THOSE TO WHOM DISCLOSURE IS MADE IN FURTHERANCE OF THE RENDITION OF PROFESSIONAL LEGAL SERVICES.

WARNING: DO NOT DISCUSS CUSTODY LITIGATION WITH CHILDREN. DO NOT SHOW THIS FORM TO THE CHILDREN OR REQUEST THEIR ASSISTANCE COMPLETING IT. DO NOT SPEAK NEGATIVELY OR DISPARAGINGLY ABOUT THE OTHER PARENT IN FRONT OF THE CHILDREN. SUCH BEHAVIOR IS FROWNED UPON BY COURTS AND MAY NEGATIVELY AFFECT THE OUTCOME OF YOUR CUSTODY CASE. ADDITIONALLY, NOTHING IN THIS FORM IS INTENDED TO BE LEGAL ADVICE AND NOTHING SHOULD BE TAKEN AS SUCH. COMPLETING THIS FORM OR SIMPLY SUBMITTING IT TO HUNT LAW FIRM DOES NOT CREATE AN ATTORNEY- CLIENT RELATIONSHIP.

Privacy Policy Regarding Social Security Numbers: Social Security numbers will be divulged only when necessary during the course and within the scope of our employment. The firm collects them from various sources, including income tax returns as well as the client. They are used to identify parties for a number of purposes, including determination of wages, preparation of orders to withhold wages for child support and reports filed with the state of Texas, and obtaining information about retirement benefits. Only employees of the firm who have a need to know will have access to this personal information. Every step is taken to protect the client's privacy. This information is kept secure within the office of the firm in file folders and file drawers. Client information will eventually be shredded.

EMAIL YOUR COMPLETED WORKSHEET TO INFO@HUNTLAWTEXAS.COM.

I. Prospective Client Information

First Name		Middle Name		Last Name		
Maiden Name (if applicable))		Your Relationship	to the Child(ren)		
Traiden I value (il applicable)			•			
How did you learn about Hu	ınt Law Fi	rm, PLLC?				
Date of Birth		City, County, & Sta	ate of Birth	Race (for	r BVS)	
Social Security Number			Texas Driver License or State ID Number			
Street Address						
City	County		State		ZIP	
Email			Phone Number			
Who else lives in your housel	hold?		Are you married?			
			[]YES []NO			
Do you currently have an attorney for this matter?		If YES, please provide the name of your current or former attorney, as well as any details you believe may be helpful.				
[]YES []NO						
Do you work outside the home?						
[] YES (answer below) [] NO						
Company Name		Job Title				
Company Street Address						
Company City	Company State		Com		y ZIP	
Company Telephone		Average Gross Mo	nthly Income	Average Number of Hours Worked Per Week		
Length of Employment			Education / Train	ing		
Long in or Employment		Zarouton / Truming				

II. Other Legal Parent Information

First Name		Middle Name		Last Name			
Relationship to the Child(rer	1)						
returning to the omitation)							
Date of Birth City, County, & St.		City, County, & Sta	ate of Birth	Race (fo	r BVS)		
Social Security Number			Texas Driver License or State ID Number				
Street Address							
City	County		State		ZIP		
Email			Phone Number				
Does he or she currently have	e an attorr	ney for this matter?	If YES, please provide the attorney's name (if known).				
[]YES []NO []NOT	SURE						
Does he or she work outside	the home	?					
[] YES (answer below) [] NO [] NOT SURE							
Company Name			Job Title				
Company Street Address							
Company City		Company State		Company ZIP			
Company Telephone		Average Gross Monthly Income		Average Number of Hours Worked Per Week			
Length of Employment			Education / Training				
Do you speak regularly with the other legal parent?			If NO, when is the last time you have spoken with the other legal parent?				
[]YES []NO							

III. Other Party Information

Is the other parent (information above) the person who has custody or who is seeking custody?						
[] YES (SKIP THIS SECTION AND DIRECTLY TO SECTION IV) [] NO (answer below)					r below)	
First Name		Middle Name		Last Name		
Relationship to the Child(ren	1)					
Date of Birth		City, County, & Sta	te of Birth Race (for BVS)		r BVS)	
Social Security Number			Texas Driver License or State ID Number			
Street Address						
City	County		State		ZIP	
Email			Phone Number	Phone Number		
Does he or she currently have	e an attorr	nev for this matter?	If YES, please provide the attorney's name (if known).			
Does he or she currently have an attorney for this matter? [] YES [] NO [] NOT SURE						
Does he or she work outside the home?						
[] YES (answer below) [] NO [] NOT SURE						
Company Name			Job Title			
Company Street Address						
Company City		Company State		Compan	y ZIP	
Company Telephone		Average Gross Monthly Income		Average Number of Hours Worked Per Week		
			·			
Length of Employment			Education / Train	ining		
Do you speak regularly with him/her?			If NO, when is the last time you have spoken with him/her?			
[]YES []NO						

IV. Child(ren) Information

First Name

INCLUDE INFORMATION FOR ALL CHILDREN INVOLVED IN THIS CASE

CHILD 1

Last Name

Middle Name

Does a court order currently exist that involves this child?					
[]YES []NO []NOT SURE					
If YES, please explain (provide details	including the cause	number, county, co	ourt, judge, etc., if available)		
Date of Birth	Age Social Se		Social Security Number		
City, County, & State of Birth	Gender				
Child's Current County of Residence		How long has the child resided in that county?			
,		8	,		
Child's Current School or Daycare	Grade Level		Does the child have a disability or special needs?		
			[]YES []NO		
Were you married to the other parent v	vhen your child was	born?			
[]YES []NO					
If NO:					
[] The father signed an Acknowledgment of Paternity (e.g. signed AOP in hospital, is on the birth certificate, etc.) [] The father took a DNA paternity test [] The father's parentage was adjudicated by a court					
CHILD 2					
First Name	Middle Name		Last Name		
Does a court order currently exist that involves this child?					
[]YES []NO []NOT SURE					
If YES, please explain (provide details including the cause number, county, court, judge, etc., if available)					

Date of Birth	Age		Social Security Number		
City, County, & State of Birth	Gender				
Child's Current County of Residence		How long has the child resided in that county?			
Child's Current School or Daycare	Grade Level		Does the child have a disability or special needs?		
			[]YES []NO		
Were you married to the other parent v	when your child was	born?			
[]YES []NO					
If NO:					
[] The father signed an Acknowledgment of Paternity (e.g. signed AOP in hospital, is on the birth certificate, etc.) [] The father took a DNA paternity test [] The father's parentage was adjudicated by a court					
	<u>CHI</u>	LD 3			
First Name	Middle Name		Last Name		
Does a court order currently exist that involves this child?					
[]YES []NO []NOT SURE					
If YES, please explain (provide details including the cause number, county, court, judge, etc., if available)					
Date of Birth	Age		Social Security Number		
City, County, & State of Birth	Gender				
Child's Current County of Residence		How long has the child resided in that county?			
·			•		
Child's Current School or Daycare	Grade Level		Does the child have a disability or special needs?		
			[]YES []NO		
Were you married to the other parent when your child was born?					
[]YES []NO					

If NO:				
[] The father signed an Acknowledgment of Paternity (e.g. signed AOP in hospital, is on the birth certificate, etc.) [] The father took a DNA paternity test [] The father's parentage was adjudicated by a court				
Have you been contacted by CPS?	If YES, when?			
[]YES []NO []NOT SURE				
How can Hunt Law Firm, PLLC help you?				