

Client Name: _____

MODIFICATION WORKSHEET

We will need the following information in preparing your modification. Please answer all questions; if a question does not apply, please mark it "N/A." Please do not hesitate to ask if you have any questions.

NOTICE OF CONFIDENTIALITY

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY-CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF EVIDENCE.

THE CONTENTS OF THIS DOCUMENT CONSTITUTE ATTORNEY WORK PRODUCT.

THE CONTENTS OF THIS DOCUMENT 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.

Attorney/Client-Privileged Information

Pending Proceedings, Other Attorneys, and What Brought You to This Office:

1. Are there any court proceedings pending on this matter? _____
2. If so, give name of court, name of Judge, date of filing, court docket number, and status of case: _____

3. Have you consulted or retained any other attorneys on this matter before coming to this office? _____
4. If so, state who and when: _____
5. Did your ex-spouse have any other attorneys? _____
6. If so, who? _____

7. Who referred you to this office? _____

Information About Divorce From Ex-Spouse:

Date of divorce: _____

Place of divorce: _____

Court: _____

Name of Judge: _____

Name of your previous attorney: _____

Name of your ex-spouse's previous attorney: _____

Have there been any changes in custody, visitation, or support formally or informally?

If so, please describe: _____

Was the Order under dispute entered by agreement or after a contested trial? _____

Items you would like to be modified:

8. Access

Ex-spouse's access

What aspect of your ex-spouse's access to the children would you like modified? _____

Your access

What aspect of your access to the children would you like modified? _____

9. Child Support

Amount of Child Support:

How would you like to alter your or your ex-spouse's child support payment? _____

10. Custody

What aspects of your custody arrangements would you like modified? _____

11. Major Medical and Health Insurance – Qualified Medical Child Support Order

What aspects of the children's medical care arrangement (that is health insurance) with your ex-spouse would you like to modify, and in what way? _____

12. Child-Support Arrearages

To what extent has your ex-spouse failed to make timely child-support payments? _____

13. Medical-Reimbursement Arrearages

To what extent has your ex-spouse failed to reimburse you for medical payments made? _____

14. Benefits Assigned to Attorney General

Have either you or your ex-spouse ever assigned benefits to the Attorney General's Office?

If so, please describe the nature and circumstances of this assignment: _____

Information for this Modification Action:

15. If you want primary custody of the children, please state in 50 words or less why you think you should have primary custody. _____

16. With whom do the children currently live? _____

17. Period of time in which this living arrangement has been in effect: _____

18. Names and ages of children of the marriage:

Child's name: _____

Date of Birth: _____ Age: _____

Child's name: _____

Date of Birth: _____ Age: _____

Child's name: _____

Date of Birth: _____ Age: _____

Child's name: _____

Date of Birth: _____ Age: _____

19. Names and ages of other children outside of the marriage:

Child's name: _____

Date of Birth: _____ Age: _____

Child's name: _____

Date of Birth: _____ Age: _____

Child's name: _____

Date of Birth: _____ Age: _____

20. Names and address of schools children attend, dates attended, and name of teacher or

principal there who is familiar with child:

Child's name: _____

School: _____

Address: _____

Dates attended: _____

Grade: _____

Teacher and/or Principal _____

Child's name: _____

School: _____

Address: _____

Dates attended: _____

Grade: _____

Teacher and/or Principal _____

Child's name: _____

School: _____

Address: _____

Dates attended: _____

Grade: _____

Teacher and/or Principal _____

Child's name: _____

School: _____

Address: _____

Dates attended: _____

Grade: _____

Teacher and/or Principal _____

Care of Children:

To the extent that both you and your ex-spouse have shared the responsibilities listed below, describe the degree to which the responsibilities have been shared:

- 21. Who helps the children get dressed in the morning? _____
- 22. Who bathes the children and grooms them? _____
- 23. Are any of the children nursing? _____
- 24. Who takes care of the children during the day? _____
- 25. Who arranges for getting children together with playmates? _____
- 26. Who puts the children to bed at night? _____
- 27. Who prepares meals? _____
- 28. Who arranges for medical and dental care and takes the children to the Doctor? _____
- 29. Who takes the children to school? _____
- 30. Who picks the children up from school? _____
- 31. Who shops for the children's clothes? _____
- 32. Who transports the children to extracurricular activities? _____
- 33. Do you or your ex-spouse participate in recreational or educational activities with the children? _____
- 34. Describe the nature of the activities and how often you and your ex-spouse participate in them. _____
- 35. Do the children receive religious training? _____
- 36. If so, from whom? _____
- 37. Who arranges the children's birthday parties? _____
- 38. Who helps the children with their homework? _____
- 39. Who attends parent-teacher conferences? _____
- 40. Are the children more likely to turn to you or your ex-spouse when they have problems? _____

- 41. Do you feel the children are closer to your or to your ex-spouse? _____
- 42. Are the children in day-care or with a sitter? _____
- 43. If so, how many hours per week? _____
- 44. Give name, address, and telephone number of the day-care service or sitter: _____

- 45. Who arranges for the day-care or sitter? _____
- 46. Who cares for the children when they are ill? _____
- 47. Who disciplines the children? _____
- 48. By what method? _____
- 49. Has the division of responsibility for child care changed over the years? _____
- 50. If so, describe: _____

Time Available to Spend With the Children and Plans for their Future Care

- 51. What are your working hours? _____
- 52. What time do you leave home? _____
- 53. When do you return? _____
- 54. Do you have flexible working hours? _____
- 55. Does your work require travel? _____
- 56. If so, describe the frequency, time involved and distances: _____

- 57. Is your work schedule likely to change in the future? _____
- 58. What are your plans for child care? _____
- 59. Describe your housing arrangements, including number of bedrooms. _____

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60. What are your ex-spouse's working hours? _____
61. What time does your ex-spouse leave home? _____
62. When does your ex-spouse return? _____
63. Are your ex-spouse's working hours flexible? _____
64. Does your ex-spouse's work require travel? _____
65. If so, describe the frequency, time involved and distances: _____
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66. Is your ex-spouse's work schedule likely to change in the future? _____
67. What are your ex-spouse's plans for child care? _____
68. Describe your ex-spouse's housing arrangements, including number of bedrooms. _____
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-
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Special Needs of the Children:

69. Do the children have any special or unusual educational or health-care needs? _____
70. If so, describe them: _____
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-
-
71. Who has worked to meet those needs? _____
72. Are you or your ex-spouse better able to meet those needs? _____
73. Has the children's academic performance changed in the last few years or months? _____
74. If so, what is the reason for the change? _____

Interference With Other Parent’s Relationship With Children:

75. Will it be alleged that you or your spouse, or your ex-spouse has interfered with the children’s relationship with the other parent or spoken badly about the other parent to the children?

76. If so, explain: _____

77. Will it be alleged that you or your spouse, or your ex-spouse has blocked the other parent’s visitation with the children? _____

78. If so, explain, giving dates and frequency with which visitation was allegedly blocked: _____

79. Will it be alleged that you or your spouse, or your ex-spouse has discouraged the children from having a good relationship with a stepparent or a “significant person” in the other parent’s life? _____

80. If so, explain: _____

Cooperation Between You and Your Ex-Spouse:

81. How well have you and your ex-spouse been able to cooperate on matters concerning the children and on matters concerning visitation or access to the children? _____

82. To what extent do you and your ex-spouse share values regarding how the children should be raised, what type of education they should have, and what type of religious training they should have? _____

Frequency of Moves and Plans to Move:

83. Have you or your ex-spouse moved in the last ten years? _____

84. If so, When and where? (Include moves in the same city.) _____

85. Do you or your ex-spouse plan to move in the near future? _____

86. If so, When and where? (Include moves in the same city.) _____

87. Does the parent who is not moving oppose the move? _____

88. Why? _____

Children Preferences:

89. Have the children told you with whom they want to live? _____

90. If so, please answer these questions:

What is the basis for the preference? _____

How strong is the preference? _____

How long has the preference been held? _____

Has the preference changed? _____

How would you feel about the children's talking to the judge about their preferences?

Children's Relationship with Other Family Members:

91. How do the children get along with each other? _____

92. How do the children get along with stepparents? _____

93. How do the children get along with stepbrothers and stepsisters? _____

94. Do the children have a particularly close relationship with either or both sets of grandparents?

95. Do the children have a strong relationship with anyone else that you believe is important?

Goals:

96. What are your future goals with the children and the reason for your goals? _____

97. To what extent do you believe that you and your ex-spouse should have joint custody

(sometimes referred to as “shared parental responsibility”), under which you both would share equally in making major decisions affecting the children and/or being with the children for substantial periods of time? _____

98. What are your ex-spouse’s goals with the children and the reasons for the goals? _____

99. Have you or your ex-spouse attempted to work out a settlement of the case between yourselves? _____

100. What progress have you made? _____

101. What are your positions? _____

Witnesses:

102. Who do you think would make good witnesses for you, and what do you think the testimony would be? (Possible witnesses include neighbors, the children’s teachers, friends, doctors, baby-sitters, day-care workers, clergy, and family members,)

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

103. Who do you think will be witnesses for your ex-spouse, and what do you think will be the testimony of those persons?

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Sensitive Topics:

IT IS IMPERATIVE YOU BE OPEN AND HONEST IN ANSWERING THE FOLLOWING QUESTIONS. ANY DISCUSSION RELATING TO ANY OF THESE TOPICS BETWEEN YOU AND YOUR ATTORNEY WILL BE PROTECTED BY THE ATTORNEY-CLIENT PRIVILEGE. IF YOU FAIL TO BE HONEST TO THE FOLLOWING QUESTIONS, IT COULD POSSIBLY HARM YOUR CASE.

If you answer “yes” to any of the questions below, please describe the situation in detail.

	You	Your Spouse or Ex-spouse
1. Committed a crime?	_____	_____
2. Been arrested?	_____	_____
3. Been in jail or prison?	_____	_____
4. Used illegal drugs?	_____	_____
5. Been hospitalized for using illegal drugs?	_____	_____
6. Abused prescription drugs?	_____	_____
7. Been hospitalized for abusing prescription drugs?	_____	_____
8. Abused alcohol?	_____	_____
9. Been hospitalized for abusing alcohol?	_____	_____
10. Been arrested for or convicted of driving while under the influence of alcohol (drunk driving)?	_____	_____
11. Engaged in gambling activities (legal or illegal)?	_____	_____
12. Engaged in other illegal activities?	_____	_____
13. Attempted suicide?	_____	_____
14. Been hospitalized for emotional or psychiatric disorder?	_____	_____
15. Suffered from or received treatment for an	_____	_____

- emotional or psychiatric condition? _____
16. Abused own spouse? _____
17. Been accused of child abuse? _____
18. Had a sexual relationship during the marriage with someone other than own spouse? _____
19. Had a sexual relationship (during or not during the marriage) with someone other than own spouse of which the children were aware? _____

If so, describe the children's reaction to the relationship and the children's feelings about the person(s) involved in the relationship.

20. Had a homosexual/bisexual relationship? _____
21. Engaged in unusual sexual practices? _____
22. Had a pregnancy outside the marriage? _____
23. Had a sexually transmitted disease? _____
24. Drunk to excess? _____

If so, what and how often? _____

25. Other? _____

26. If you or you spouse or ex-spouse has a relationship with a person whom the children see frequently and that person would answer "yes" to one or more of the preceding questions, describe the situation:

27. Do you or your spouse or ex-spouse suffer from any physical disability that would interfere with being able to care for the children? _____

28. Have you or your spouse or ex-spouse made any photographs or audio or visual recordings of the other party? _____

29. If so, describe the content: _____
