A.C.F.-Assisting Changing Families LLC Parenting Time Expeditor Intake Form:

Today's Date:
Name:
Address:
Email:
Phone number:
Please explain the parenting arrangements. What are the custody arrangements? What is the parenting time schedule?
Name(s) and age(s) of child(ren):
Attorney Information: Name:
Phone number:
Email:
Are there any Domestic Abuse, Order for Protection, Allegations of abuse towards the children?
Is there a court order? Y/N If there is a court order, please attach to this document.
Do the parents have contact?
What form of communication, if any, do the parents have?
Does either parent have issues with alcohol and/or drugs or any mental health concerns? (Please elaborate)
What are the payment arrangements?