



Guardian Ad Litem (GAL) Information Packet

Thank you for taking the time to fill out this packet truthfully, fully and accurately. I ask that you provide me with as much information as you can as the information provided by you via this packet is a big part of what I use to write my report and make my recommendation. In filling out this packet, feel free to attach any additional sheets and / or documents as needed to provide me with the information you want me to have.

PLEASE NOTE THE FOLLOWING

- It is your responsibility to schedule the initial meeting with the GAL. You may email me the packet before our meeting OR simply bring it to our first meeting completed. I will try to work around your schedule for our meeting.
- Please take the time to verify information that is readily available on the internet or otherwise. This will save me time and will save you money. If you cannot provide all the information requested, please provide what you can.
- Please be honest as you complete this packet.
- You may generally contact the GAL by phone or email. The GAL will endeavor to respond to your communication as soon as possible. Please keep in mind, if you are attempting to share new or additional information with me, email is the best way to do so. I am also always happy to schedule time to discuss matters.
- The GAL is NOT the Judge or Magistrate on your case. I do not have the power to enforce a court's decision or remedy a situation involving the other parent even if you clearly think you are in the right. I cannot order the order party to do anything or to stop doing something. If an issue arises, the best way to document it is via an email clearly stating the date the issue occurred, and providing reasonable detail.
- The GAL will do a home visit to your house at some point during this case. It is not required that you clean or prepare your home in any special way. I want to see your home in its "normal state."
- The GAL will speak with your children (if they are old enough). This may take place at a parent's house, the child's school, or my office depending upon the needs of the case. I generally do not have the parents present when I speak with the child. If you have concerns about your child speaking with me, please let me know. I want to make the experience as easy as possible for them.
- For sensitive issues where it may be in the best interest of the children, I reserve the right to seek a Court ruling or order from the Magistrate or Judge presiding over the case

including but not limited to asking for a protective order that I feel will be in the best interest of the children.

- Please keep me apprised on any issues that arise during the case or any substantial changes (new job, new home, new baby, etc.). I strive to make sure I have the most up to date information, but I cannot do so unless the parties keep me informed.
- The GAL is not an attorney for either of the parties including in any case where the parties' may not have attorneys. I cannot offer legal advice to either party.
- The GAL is a mandatory reporter. This means that the GAL will report any suspicion of child abuse or neglect of which the GAL has firsthand knowledge to the appropriate child protective services agency.
- You are responsible for paying the GAL's retainer by the due date stated in the court's order unless other arrangements have been made with the GAL. Payment may be made on the GAL's website. Please note that while the GAL may endeavor to work with a party on payment arrangements, the GAL *does not* have the power to modify a Court's order regarding payment. I will send periodic invoices to the parties billing against the retainer paid first. After the retainer is exhausted, I will request additional retainers from the parties including securing any court orders for the same. If at any time you have a question about an invoice, please do not hesitate to contact me. *You will not be charged for any time spent discussing or clarifying any invoice or bill.*
- You will likely be asked to sign a release to obtain your children's school as well as medical records depending upon the issues raised in this case.
- Attach any additional pages as needed to complete this packet.
- If any information in this packet should change during the pendency of this case, please send me an email to update the information. It is not necessary to fill out a new packet, just a quick note.

If you have any questions, please do not hesitate to contact me. I look forward to working with you on this matter.

Sincerely,

Christopher J. Tamms
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Westerville, Ohio 43082
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A. Contact Information

Name. _____ Date of Birth: _____ SS No. _____

Address. _____

Phone. _____ Email Address. _____

Driver's License Number _____ Is your license currently valid: YES. NO

If not state why: _____

Opposing Party Contact Information

Name. _____ Date of Birth: _____ SS No. _____

Address. _____

Phone. _____ Email Address. _____

B. Children's Information

1. Name: _____ DOB: _____

School District / School: _____ Grade: _____

2. Name: _____ DOB: _____

School District / School: _____ Grade: _____

3. Name: _____ DOB: _____

School District / School: _____ Grade: _____

4. Name: _____ DOB: _____

School District / School: _____ Grade: _____

Do any of the children have any medical or mental health issues? If so please describe. _____

Have any of the children been in trouble with law enforcement? _____

For each of the following please list the individuals who provide services to the children. If there is more than one, list each.

Name, Address, and Phone Number	Relationship to the child	Is there anything important I should discuss with them?
	Children's Doctors	
	Daycare Providers for the Children	
	Counselors	
	Teachers. It is not necessary that you list out every teacher with whom your child interacts	

C. Household Information

List all people who have resided in at your address during the **past six months** including part time you do not have to list the children.

Full Legal Name	DOB	Relationship to you	Still Living There	Criminal Record?
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	

Are you romantically involved with any other person YES NO

Name _____ Address _____

DOB _____ Length of Relationship _____

Does this person have contact with the minor children? _____

Does this person have any criminal record? _____ History with Child Protective Services _____

D. Questions: Answer "Yes" or "No" to each.

1. Has the other party or anyone else ever accused you of abusing alcohol?
YES NO
2. Has the other party or anyone else ever accused you of abusing any drugs?
3. YES NO
4. Have you ever entered into a drug or alcohol treatment program within the past 10 years?
YES NO
5. Do you suffer from or are you being treated for any physical health condition?
YES NO

6. Do you suffer from or are you being treated for any mental health condition?
YES NO
7. Have you ever had a case filed against you with Child Protective Services?
YES NO
8. Have you ever filed a case with child protective services regarding the other party?
YES NO
9. Has a civil protection order (CPO) ever been issued against you?
YES NO
10. Have you ever filed a civil protection order (CPO) against the other party or anyone else?
YES NO
11. Has your drivers' license been suspended for any reason during the past five years?
YES NO
12. Have the police been called to your home during the past 5 years?
YES NO
13. Have you ever been charged with domestic violence (even if you pled to something else)?
YES NO
14. Have you ever been arrested for any reason during the past 10 years?
YES NO
15. Have you ever been involved in an abuse / neglect / dependency case in any Court at any time?
YES NO

For every answer that is anything other than “No” please provide additional details. Include dates, case numbers, specific allegations and any other relevant information? Feel free to attach any additional sheets of paper if needed.

Counseling: For any mental health professional you have seen during the past 7 years please provide their contact information (name, address, phone number), the start and end date of services and the reason(s) they were consulted. You may be asked to sign a release.

Arrest / Criminal Record- List each and every time you have been charged with a crime. Please take the time to research and provide correct information.

FOR YOU

Alleged Crime	Date of Alleged Offense	Which Court / Case Number	Was there a conviction? If so what was the sentence?

FOR ANYONE WITH WHOM YOU RESIDE OR HAVE RESIDED WITH IN THE PAST YEAR

Alleged Crime	Date of Alleged Offense	Which Court / Case Number	Was there a conviction? If so what was the sentence?

FOR THE OTHER PARTY

Alleged Crime	Date of Alleged Offense	Which Court / Case Number	Was there a conviction? If so what was the sentence?

Employment / Education Information

Current Employer

Name _____ Salary / Hourly Rate _____

Normal Weekly Work Schedule _____

How long have you been with this employer _____

Previous Employers / Salary / Work Schedules / Dates of Employment

Employer	Salary / Hourly Rate	Normal Work Schedule	Dates of Employment

E. This Case

What are your goals in this case? _____

Describe the current parenting time arrangement: _____

Describe what parenting time arrangement you feel is in the minor children's best interest and why. _____

Who pays child support? Me Other Party No Order Amount _____/month

Is the Child Support current? YES NO Amount of Arrearages _____

Do you feel that you can co-parent with the other parent? YES NO

What are the specific issues in this case as you see them (check any and all that apply).

_____ Financial issues (i.e. child support, sharing expenses, etc.) _____

_____ Interference with parenting time _____

_____ Conflict with other parent / step parent / significant other _____

_____ Child doesn't want to see me OR doesn't want to see the other Parent _____

_____ Issues with decision-making _____

_____ Safety Concerns _____

_____ Abuse or Neglect of children _____

_____ Issues with Extracurricular activities _____

_____ Issues with school / academic performance _____

_____ Different parenting styles / rules / discipline / expectations at each house _____

_____ Logistical Issues / parenting time _____

_____ I want to move / other parent wants to move _____

_____ health issues with the children _____

_____ alcohol abuse / substance abuse _____

_____ mental health issues _____

_____ other issue(s) _____

Provide the contact information for a couple of people whom I can contact regarding the issues you've raised regarding the children. The ideal candidates will have witnessed issues firsthand and be familiar with you, the other parent, the children and / or any combination thereof.

Name, Address, and Phone Number	Relationship to you	What should I discuss with them? If their knowledge is limited to one child say so.

