

Family Dispute Resolution Service

CLIENT ASSESSMENT SHEET



CHILDREN AND PROPERTY – CONFIDENTIAL

THIS ASSESSMENT SHEET MUST BE RETURNED BEFORE A CONFERENCE DATE CAN BE CONSIDERED

ABOUT YOU & THE PERSON YOU ARE GOING TO CONFERENCE WITH

Your Name: **Preferred pronoun:** He /She/ They / Other

Solicitor: **Contact Number:**

Other Person's Name: **Preferred Pronoun:** He / She / They / Other

Solicitor: **Contact Number:**

1. Do you or the other person have any specific requirements (Eg. Interpreter or cultural support, physical or intellectual disability) *If yes, please give details*

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2. Are there any health problems that may affect the ability to discuss the issues?
(Eg. drugs/alcohol, mental health issues, medical issues impacting on ability to care for the child/ren)
If yes, please give details

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Date of living together:

Date of marriage:

Date of separation:

DETAILS ABOUT THE CHILD/REN

Name	Date of Birth	Who do they live with?

3. Do any of the child/ren have special needs or medical problems? Yes ☐ No ☐
If yes, give details

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4. What are the current arrangements for the child/ren to spend time with the parents (or others)
Please give details

5. Are there any current orders, parenting plans, and/or written agreements between you and the other party? Yes ☐ No ☐
If yes, please provide copies with this assessment sheet

6. Have you recently attended a Family Relationship Centre? Yes ☐ No ☐
Please provide a copy of any agreement reached with this assessment sheet

7. Have you been to court about the child/ren? Yes ☐ No ☐
If yes, which Court and what is the next court date?

- 7a. Has the Court given your child/ren a Lawyer? Yes ☐ No ☐
If yes, what is their name?

- 7b. Has a report been prepared about the child/ren? Yes ☐ No ☐
If yes, please attach a copy of the report

CHILD ABUSE / DOMESTIC AND FAMILY VIOLENCE

CHILDREN'S MATTERS

Child Abuse

8. Do you think the child/ren are safe with the other party? Yes ☐ No ☐
If no, tell us the areas of risk or harm

9. Have the child/ren ever been threatened by the other party? Yes ☐ No ☐
If yes, give details

- 9a. If there was domestic or family violence during the relationship, were the child/ren exposed to it? Yes ☐ No ☐
If yes, please give details

9b. If there was domestic or family violence during the relationship, were the child/ren physically harmed? Yes ☐ No ☐
If yes, give details

10. Has there been any past involvement of a child welfare authority or the Police? Yes ☐ No ☐
If yes, give details (include outcomes if known)

10a. Is there any current involvement with a child welfare authority or the Police? Yes ☐ No ☐
If yes, give details

CHILDREN'S AND PROPERTY MATTERS

Domestic & Family Violence

11. Describe the level of conflict/family violence between the parties during the relationship High ☐ Medium ☐ Low ☐ None ☐

12. Describe the level of conflict/family violence between the parties currently High ☐ Medium ☐ Low ☐ None ☐

13. Have you been threatened by or fearful of the other party? Yes ☐ No ☐

14. Are you currently fearful of the other party? Yes ☐ No ☐

15. Are you the Protected Person in a current Domestic Violence Order? Yes ☐ No ☐
If so, please provide a copy with this assessment sheet

15a. Are you the Defendant in a current Domestic Violence Order? Yes ☐ No ☐
If so, please provide a copy with this assessment sheet

16. Have you or someone on your behalf (eg Police) ever applied for a Domestic & Family Violence Protection Order against the other party? Yes ☐ No ☐
If yes, please give details

17. Have there been any breaches of a Domestic & Family Violence Protection Order? Yes ☐ No ☐

18. Can you speak and listen freely with the other person in the same room? Yes ☐ No ☐

18a. If you said no to 18, would having solicitor/s present at the Conference make it okay for you to work in the same room for some parts of the Conference? Yes ☐ No ☐

18b. If you said no to 18a, would you be able to speak freely if the other party was not in the same room but linked in by phone or video conference? Yes ☐ No ☐

18c. If you said no to 18b, do you feel that you need to be in separate rooms to be able to speak freely ('Shuttle Conference')? Yes ☐ No ☐

GENERAL

19. Do you or the other party have any criminal convictions that may be relevant to this Conference? Yes ☐ No ☐
If yes, please give details:

CHILDREN'S MATTERS

20. What things do you want to talk about and negotiate at the conference?
(eg. parental responsibility, where the children will live, time the child/ren will spend with each parent)?

21. Are there any professional Support Workers who need to be consulted or involved in the matters to be discussed at the conference? Yes ☐ No ☐
(Eg. Disability, Domestic Violence or Mental Health Support Workers, Community Care Officers, Social Workers)

22. Is there anyone supporting you personally who should be given special consideration to be allowed to attend the conference with you? Yes ☐ No ☐
(Eg direct caregivers who may be central to the arrangements for the child/ren)?

23. Are there any outstanding financial issues? Yes ☐ No ☐
To be eligible for a property conference you must complete our 'Property Preparation Form' but fill in basic details below

Item	Value	Money Owing

CONSENT

24. Do you agree for the name of your solicitor (if you have one) to be released to the other party's solicitor prior to the conference to assist in preparing the paper work for the conference? Yes ☐ No ☐

Date:

Date: _____

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