CHICAGO VOLUNTEER LEGAL SERVICES

Because equal access to justice is everyone's fight

GUARDIAN *AD LITEM* CASES BACKGROUND INFORMATION

Name _____ Child Name _____

Date of Birth _____ Child DOB _____

Relationship to Child _____

Addresses in the Past 5 years	Dates in Residence (Move-In and Move-Out dates)	Type of Setting (shelter, rent, own, living with friends or family)	Rent/ Monthly Payments	People in the Home (Names and DOBs)	# of Bedrooms	Where does everyone sleep?

Adult Education:

Highest grade completed? _____

List all degrees, certificates, diplomas, and licensures earned:

Financial Information:

What is your primary means of financial support? _____

Other sources of income:	Amount
Child Support	
Social Security for Self	
Social Security for Child(ren)	
Public Aid	
Food Stamps	
Housing Assistance	

Spouse or significant other income: _____

Work History – Last 5 Years:

Employer	Dates	Pay (per check or per hour)	Hours	Outcome (include reason for leaving, workplace sanctions and promotions)

Other Children:

Name	Age	Other Parent	Where does child live?	If living with someone other than parent, explain circumstances

Interviewee's Medical and Wellness Information:

Doctor's name/phone number: Any health concerns or major injuries?

Any medications (prescription or over-the-counter)?

What drugs and alcohol have you used in the past, including marijuana and beer even if it was once or a small amount (include details of sobriety dates, rehab, sponsor, etc)?

What is your current use of drugs and alcohol even if it is a small amount or on occasion? (include substance, frequency, amount)?

Have you experienced any of these major life events as a child or adult: ☐ Homelessness ☐ Deaths ☐ Accidents ☐ Controlling or high conflict relationships ☐ Other important events (explain)_____
Please describe what happened and when it occurred:

Has anyone ever referred or encouraged you to seek help due to emotional/psychological/behavioral issues (even if you did not agree)?

Has a professional ever diagnosed you with: ☐ Depression ☐ Schizophrenia ☐ Bipolar/Manic Depression ☐ Attention-Deficient/Hyperactivity Disorder (ADHD) ☐ Post-Traumatic Stress Disorder (PTSD) ☐ Substance Abuse/Dependence ☐ Other diagnosis? _____

Have you ever received *outpatient* treatment for emotional/psychological/behavioral issues? No ◯ Yes ◯
If yes, please explain the reason and outcome:

Have you ever received *inpatient* treatment for emotional/psychological/behavioral issues? No ◯ Yes ◯
If yes, please explain the reason and outcome:

Support System/Interpersonal Relationships:
Who are the people that you encounter most frequently in your day-to-day life? What are their relationships to you?

Who supports you most in your day to day life and how?

Legal Information:

Previous Arrests/Convictions/Felonies/ Misdemeanors	Date	Disposition	Other outcomes (e.g., loss of custody, mandated services, housing problems)

Any DCFS involvement? No ◯ Yes ◯ If yes, explain

If current DCFS involvement, worker's name and phone number: _____

Child Information:

School

Name of child's current school/daycare

_____

Grades (mostly As, Bs, Cs, Ds, Fs)

_____

Teacher's Name

_____

Type of educational programming (e.g., regular, special education, advanced)

_____

What is your level of involvement in the child's schooling?

Does the child have any special education needs (e.g., learning, emotional, physical, or problems with attention, seeing, hearing, or balancing)?

Behavioral/Emotional

Does the child have a history of behavioral/emotional issues (e.g., defiance with rules/authority figures, fighting, inability to calm self, fearfulness, hyperactivity, truancy, running away)? If yes, explain (When? For how long? What has been done?):

Does the child have any health problems? If yes, explain (When? For how long? What has been done?):

Any social problems (e.g., no/few friendships, fighting, impaired nonverbal interactions)?

Describe the child:

Describe your relationship with the child:

What do you think the child needs in order to facilitate healthy development (e.g., social, emotional, educational)?

What are the current circumstances that brought you here now

Any additional notes/comments

Be sure to collect all papers and/or ask for the party to send you additional information including:

- Current lease
- School records
- Social security payments
- Releases to speak with doctors
- Contact info for all therapists/social workers/DCFS workers
- Documentation of sobriety
- Paystubs

Interviewer _____

Date of interview _____