Print Form

CHILD SUPPORT DOMESTIC VIOLENCE QUESTIONNAIRE

NOTICE: If you do not complete and return this form, the federal government will release information about you or your child's whereabouts to other child support agencies, and possibly to the child's other parent.

Case No.: _____

Your name: _____

Other party' s name: _____

SECTION I: Check the appropriate box for each of the questions.

1. Have you or a child in your care ever been a victim of domestic violence or child abuse committed by the other party to your child support case? ☐ Yes ☐ No
2. Have you ever obtained a restraining order, emergency protective order or stay aw ay order against the other party to your child support case? ☐ Yes ☐ No

   If "Yes", please attach a copy of this order and provide the following information:

   County/State: _____ Court Case Number: _____

   Expiration Date: _____
3. If you or a child in your care receive public assistance, do you w ant to claim " Good Cause" because of increased risk of physical, sexual, or emotional harm to you or your child, and request that the w elfare department authorize that your support case be closed? ☐ Yes ☐ No

SECTION II: You MUST complete this section if you answered "yes." to any item in Section I

Please provide detailed domestic violence information including dates, times, places and w itnesses (At tach additional pages if needed.)

SECTION III: Check the appropriate box, sign, date and return the form to the local child support agency.

☐ The disclosure of my address or other information identifying my location could be harmful to me or the child(ren) in my care. I am requesting that my address or other identifying information not be given to the other party in this case. This request for non-disclosure of information w ill remain in effect until I notify the local child support agency in w riting, and the office that manages my case acknow ledges that they have received my request. I understand that under federal law , an authorized person may submit a w ritten request to the court w hich has jurisdiction to make or enforce child custody or visitation determinations. I w ill be notified in w riting by the local child support agency if the court orders the release of information on my case.

☐ The disclosure of my address or other information identifying my location is not harmful to me or the child(ren) in my care. I understand this information w ill be made available to the federal government, courts, child support agencies and sometimes to the other parent of the child(ren).

I declare under penalty of perjury under the law s of the State of California that the foregoing is true and correct.

_____ _____

Signature