

Crellins Carter | SOLICITORS

Name:
Your Solicitor is:
Your appointment is on:

Please complete this Questionnaire and return it to your Solicitor before the meeting, if possible. We are happy to receive it by fax or e-mail if this assists.

We will also require you to bring with you to the appointment a valid passport or modern photo driving licence to verify your identity and two recent utility bills (this is a requirement of the Solicitors Regulation Authority and current legislation requires us to do this).

CHILDREN QUESTIONNAIRE

Full Name:

Address:

Correspondence Address (if different to above):

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When and where did you last live together?

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Have you or your spouse always been resident in the UK? YES/NO

If no, please give details:

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Home Tel: Work Tel: Mobile Tel:.....

E-Mail: Fax Number:

Occupation:

Date of Birth:

Spouse's/Partner's Full Name:

Spouse's/Partner's Address:

.....

Spouse's/Partner's Home Tel: Work Tel:

Spouse's/Partner's E-Mail: Fax Number:.....

Spouse's/Partner's Occupation:

Spouse's/Partner's Date of Birth:

Date relationship started & periods of cohabitation prior to marriage:

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Date of Marriage: Date of Separation:

Full Names and Dates of Birth of Children:

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Names and Addresses of Schools:

(please state whether state or independent schools and level of fees)

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Detail any health problems suffered by you, your spouse/partner or your children:

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If relevant, please give details of current contact arrangements:

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Details of any previous matrimonial proceedings:

If possible, please attach any copy documentation, in particular any Orders made.

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Please indicate how you learnt of Crellins Carter and instructed us:
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**PLEASE USE THIS SECTION TO GIVE GENERAL
INFORMATION CONCERNING YOUR CASE**

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QUESTIONS AND ADVICE SOUGHT

Please list any particular questions/concerns you wish to raise and discuss when you meet with us.

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2.
3.
4.
5.

Please visit our website at www.crellinssolicitors.co.uk