

**A.C.F.-Assisting Changing Families LLC**  
**Christine Davis**  
**Parenting Time Expeditor/Parenting Consultant**  
**Intake Form:**

**Today's Date:**

Name, address, email and phone number of parent-

Are you the residential or non-residential parent?

Name(s) and age(s) of child(ren)

Attorney Information: Name, phone number, email;

Guardian ad Litem Information: Name, phone number, email;

OFP (Order for Protection) HNCO (Harassment No Contact Order) or DANCO (Domestic Abuse No Contact Order) between the parents= Y/N

OFP (Order for Protection) HNCO (Harassment No Contact Order) or DANCO (Domestic Abuse No Contact Order) includes child(ren)= Y/N

Allegations of abuse (towards the children)= Y/N sexual abuse= Y/N emotional abuse= Y/N,  
(if you answered yes please explain the nature of the allegations, and if any charges have been filed)

Allegations of neglect (towards the children = Y/N if yes is it medical, school, social, basic needs  
(Please elaborate)

Is there a court order? Y/N-If there is a court order please attach to this document

Do the parents have contact?

What form of communication, if any, do the parents have?

Does either parent have issues with alcohol and/or drugs?  
(Please elaborate)

Does either parent have mental health issues?

Briefly describe your perspective on the current situation and why services are requested:

Any special notes regarding the health, welfare and safety of the child(ren)?

Any other concerns not previously noted?