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**CHILD CUSTODY EVALUATION QUESTIONNAIRE**

**IDENTIFYING DATA -**

**Case Name:** \_\_\_\_\_ **Case Number:** \_\_\_\_\_

**Your Present Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Drivers License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone numbers: Home:** \_\_\_\_\_ **Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Marital Status:** \_\_\_\_\_

**Who lives at home with you:** \_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT -**

**Employer:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_ **Length of Employment:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Work hours:** \_\_\_\_\_

**Gross Income for the last calendar year:** \_\_\_\_\_

**Gross Income for the present calendar year:** \_\_\_\_\_

CHILD CUSTODY EVALUATION QUESTIONNAIRE  
SUZIE DUPEE MD

**MARITAL HISTORY -**

**List all marriages and list all relationships (other than marriage) resulting in children. Please include the following information for each marriage or relationship resulting in children:**

- Name of spouse or partner.
- Date of marriage or relationship.
- Date the marriage/relationship was terminated and how terminated.
- Names and dates of birth of children resulting from the marriage

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1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_

**Are you remarried?      Yes \_\_\_\_\_      No \_\_\_\_\_**

**If yes, please write the name of your new spouse.**

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**If you have not remarried, are you in a serious relationship now? Yes \_\_\_ No \_\_\_\_\_**

**(If you have remarried or are living with a "significant other" please complete the "Stepparent of Other Household Member's Information" question at the end of this form).**

**Describe the marital history with your former spouse in dispute. Provide details such as when and where you met, the nature of your courtship and a description of your relationship before the marriage.**

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**Date and place you married (if married).**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Describe the positive attributes of the other parent.**

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**Describe the marriage/relationship with the other parents.**

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**When did you separate? Describe the circumstances leading up to the separation from the other parent.**

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**Describe any history of domestic violence including details about specific incidents. (Provide copies of all police reports or restraining orders).**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Detail the history of any involvement of the Department of Children and Family Services (DCFS). Give dates of reports and investigations and the names and phone numbers of investigators. Provide any paperwork you have on the case and/or arrange for your attorney to subpoena the file from DCFS.**

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**Describe in your own words the other parent's parenting of your child or children.**

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**Describe the responsibility of care of the child or children during the marriage. This means to describe who took care of the children during the day, at night and on weekends. Also, detail how nannies, babysitters, relatives or others providing childcare took part in the responsibility of care of your child (ren). Also describe how the parents' employment affected childcare.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**When did you separate? Describe the circumstances leading up to the separation from the other parent.**

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**YOUR BACKGROUND -**

**Where were you born and raised?**

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**If you were born in another country, when and why did you immigrate to the U.S. and when did you receive your permanent residency and/or citizenship?**

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**Did your parents divorce? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, how old were you at the time and describe how the divorce affected you?**

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**Did your parents remarry? Describe your relationship with your stepparent or stepparents. Be as specific as possible.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Describe your father. Include his occupation, your relationship with him when you were growing up and your relationship with him now. Where does he live? Is he involved with your child or children now?**

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**Describe your mother. Include her occupation, your relationship with her when you were growing up and your relationship with her now. Where does she live? Is she involved with your child or children now?**

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**Describe your siblings: Include their age, occupations, places of residence, marital status, and children. Also describe your relationship with them and how often you see them and talk to them.**



CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**PERSONAL DATA-**

**Medical History (include hospitalizations and medications)**

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**Education**

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**Employment History**

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**Military Service (describe the service, type of duty and if you were in combat)**

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**Please describe any marriage counseling you have had. Give details about the reason for treatment, the name and phone number of the therapist and the dates of treatment.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Mental Health History (include information about consultations with psychiatrists, therapists, counselors or other mental health professions. If psychiatrically hospitalized, detail the reason for hospitalization such as suicidal behavior, eating disorders, psychosis, etc. If you have been psychiatrically hospitalized, please provide the hospital records).**

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**Alcohol/Drug Use: (if you have been in a drug or alcohol treatment program, please provide the hospital or clinic records.)**

**Have you ever experimented with or used the following substances:**

	<b>YES</b>	<b>NO</b>
1. Alcohol, more than four drinks a day	_____	_____
2. Marijuana or cannabis in other forms	_____	_____
3. Cocaine	_____	_____
4. Amphetamines	_____	_____
5. Hallucinogens (PCP, LSD)	_____	_____
6. Heroin	_____	_____
7. Prescription medications	_____	_____
8. Over the counter medications	_____	_____

**If you answered yes to any of the above about alcohol/drug use, please give information about first use, how long you used, the last time you used and whether you went through any rehabilitation programs.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Detail any history of arrests, for whatever reason. This includes but is not limited to arrests for driving under the influence, criminal prosecution, or dishonorable discharge from the Armed Forces. (If there is a history of any of the above, provide police, court, DMV probation, and discharge records).**

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**THE CHILDREN –**

**Children involved in this custody case -**

<b>Name</b>	<b>Age/Date of Birth</b>	<b>School &amp; Grade</b>
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**Your other children (not involved in this custody case).**

<b>Name</b>	<b>Age/Date of Birth</b>	<b>School &amp; Grade</b>
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**Describe each child as you would to a stranger.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Describe briefly the school history for each child. Describe their academic performance and social adjustment at each grade level. (Please attach the latest school report card for each child).**

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**What is the current Court Order/Custody Plan and date of the Order? Be as specific as possible. (Include copies of past and current agreements as well as court orders regarding custody and visitation).**

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**Give a detailed description of the custody and visitation arrangements since the separation. Be as specific as possible. (Include dates and a description of the circumstances that may have led to any changes in the custody and visitation arrangements).**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**STEPPARENT OR OTHER HOUSEHOLD MEMBER'S INFORMATION -**

**If there are stepparents or if there is another adult residing in the house, please provide the following information:**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Describe your relationship (e.g. new spouse/stepparent, dating, committed, engaged, roommates, etc.). Detail how much time you spend with the stepparent or other household member and how much time that person spends around the children.**

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**Detail this person's relationship with the child or children at issue and how much time they spend around the children.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**Provide the names and ages of this person's children and how well they get along with your child or children.**

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**If you plan to share your home with another adult in the future, please complete the following questions in regard to the other adult and their children.**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_

**Phone Number:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Describe your relationship with this individual (e.g. new spouse/stepparent, dating, committed, engaged, roommates-to-be, etc.). Detail how much time you currently spend with this person and how much time that person spends around the children.**

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**Detail this person's relationship with the child or children at issue.**

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**Provide the names and ages of this person's children and how well they get along with your child or children.**

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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**PLEASE PROVIDE AN ELECTRONIC COPY OF THIS  
QUESTIONNAIRE VIA EMAIL**

CHILD CUSTODY EVALUATION QUESTIONNAIRE  
SUZIE DUPEE MD

**This section does not need to be exchanged between the parties.**

**Collateral Information:** Please provide the names, telephone numbers, and **email addresses** (if possible) of a total five or six people who know you and your ex-spouse and are aware of the nature of your current relationship with your children. Please inform your friends and family that I might be calling (I might not call them all). Additionally please provide the telephone numbers, **fax numbers and email addresses** of your children's school teachers and/or your and the child's therapists: (Fax numbers are very helpful so that releases can be expedited):

Teachers for the current and past year:

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Children's therapists (current and past):

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Parents' therapists (current and past):

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Family members (describe relationship):

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CHILD CUSTODY EVALUATION QUESTIONNAIRE  
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Friends (describe relationship):

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Others (specify relationship):

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