

RFTA | Rise From the Ashes
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CONFIDENTIAL- DOMESTIC RELATIONS
INTERVIEW FORM

Were you or are you currently married to your abuser? Yes / No

If Yes, how long? _____

Do you have children together? Yes / No

If Yes, how many and what are their ages? _____

Does your abuser currently have access or visitation to the children? Yes / No

If Yes, please describe: _____

Do you feel as if your abuser will fight for the custody of your children? Yes / No

Do you have a family support system? Yes / No

For Yes **and** No please describe: _____

Does your abuser have a family support system? Yes / No

If Yes, do you have a relationship with your abuser's family? Yes / No

If Yes, please describe: _____

Does your abuser have a criminal history? Yes / No

If Yes, please describe: _____

Has there been any domestic violence charges filed in regards to you and your abuser? Yes / No

If Yes, please describe: _____

Do you have a criminal history or have charges ever been filed against you? Yes / No

If Yes, please describe: _____

Have there been any instances of child abuse in regards to your abuser and your children? Yes / No

If Yes, please briefly describe: _____

Were charges filed? Yes / No

If Yes, what was the outcome of those charges? _____

Do you currently feel as if you or your children are in danger? Yes / No

If Yes, please describe why: _____

Do you currently have or have you had an order of protection against your abuser? Yes / No

If Yes, when was the order issued and is it still in effect? _____

Where are you currently living? _____

How long have you lived there? _____

Are you expecting to stay at your current place of residence for the foreseeable future? Yes / No

Are you currently or have you ever resided in a domestic abuse shelter? Yes / No

Do you have a job? Yes / No

If Yes, please describe your duties and income: _____

If No, please describe why: _____

Are you able to financially support yourself and your children? Yes / No

If No, please describe why: _____

Are you currently receiving government assistance (SNAP, TANF, Medicaid, Daycare, etc)? Yes / No

If Yes, which ones: _____

What caused the final separation between you and your abuser (Why are you no longer together)?

Had you tried unsuccessfully to leave before? Yes/ No

If Yes, please describe: _____

How long have you currently been separated? _____

What are your goals in legally separating yourself from your abuser?

What fears do you have about going through the legal process?

What steps have you taken towards becoming self sufficient?

Where do you see yourself in the future?
