

DIVORCE COOPERATION INSTITUTE
Early Neutral Evaluation (ENE) Intake Form
Pre-Judgment - Divorce
Personal Data and Information

1. Name: _____

Address: _____

Home phone: _____ Work phone: _____

2. What are the issues to be evaluated? _____

3. Current marriage: date: _____

4. Are you and your spouse living together at this time? yes: _____ no: _____

If no, give date of separation: _____

5. Children of current marriage:

Full name:

Date of birth:

Residing with:

6. Are you currently paying or receiving child support for these children?

Paying:

yes: _____ no: _____

Receiving:

yes: _____ no: _____

If yes, how much? _____

If yes, how much? _____

Children of previous marriage(s):

Full name:

Date of birth:

Residing with:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you currently paying or receiving child support for these children?

Paying:

yes: _____ no: _____

Receiving:

yes: _____ no: _____

If yes, how much? _____

If yes, how much? _____

7. Are you currently paying or receiving maintenance?

Paying:

yes: _____ no: _____

Receiving:

yes: _____ no: _____

If yes, how much? _____

If yes, how much? _____

8. Other than your children and/or your spouse, are there any people living with you at the present time?

yes: _____ no: _____

If yes, list their names and their relationship to you.

Full name:

Relationship:

_____	_____
_____	_____
_____	_____
_____	_____

9. Are you employed? yes:_____ no:_____

Employer:_____

Address:_____

Job title:_____ Nature of job:_____

Date hired:_____ Current salary:_____

Work schedule:_____

10. Are there any court orders in effect at this time regarding custody and placement?
yes:_____ no:_____

If yes, what are those orders? (please attach copies)_____

If no (or if current practice is different than the court order), what is the current placement schedule?_____

11. If the issues involve support, maintenance, property or enforcement of marital property agreements, please submit updated Financial Disclosure Statements, Marital Estate Balance Sheets (if available), two years of income tax returns, and copy of the Marital Property Agreement (if applicable).

12. Your attorney's name, address and phone number:_____

13. In your opinion, what are the impediments to settlement? _____

Date: _____

Signature: _____