								FL/E-ME-825
							(For Offic	ial Use Only)
FAMILY COURT SERVICES (FCS)								
3341 Power Inn Road, Room 104, Sacramento, CA 95826								
GRANDPAF	RENT VISI	TATION Q	UES	TIONN	AIRE			
		FIDENTIAL						
Please answer the for prior to your schedule		t by U.S. Mail o	or in-pei	rson to the				ırn it to FCS
			Case r	Number:				
A. TELL US ABOUT YOURSE NAME(S): Last (Jr./Sr.)	ELF (Please print First	and only use black	or blue in	nk) Middle				
	T list			Middle			Maternal Gra	
							Paternal Grai Mother Father	ndparent(s)
							Other	
CURRENT ADDRESS: Numbe	er, Street Name (Apt.	. #)			City		State	Zip
					-			
E-MAIL ADDRESS: BEST PHONE N						ONE NO	D.:	
#1 Date of Birth Driver's License				./ Prefe			red Language	Do you need an
Social Security No (last 4) XXX – XX –	/ /	California ID No.						Interpreter?
#2	Date of Birth				Prefe		red Language	Do you need an
Social Security No (last 4) XXX – XX –	/ /	California II	D No.					Interpreter?
B. EMPLOYMENT								
WORK Monday	Tuesday	Wednesday	Thu	ursday	Friday		Saturday	Sunday
SCHEDULE:								
C. HISTORY OF VISITS	or regarding vis	vitation?						
Is there an existing ord	ler regarding vis	sitation?						
If yes, what is it?								
Briefly describe the eve	ents that led to t	this appointmer	nt with F	-CS.				
•								
How much time has the child(ren) spent with the grandparent(s) prior to this action?								
Has the child(ren) ever lived the grandparent(s)?				If yes, when?				
Was the parent(s) living there as well?				If yes, when?				
was the parent(s) living there as well?				l i yes, when?				

C. HISTORY OF VISITS (Continued)							
Does a grandparent have Guardianship of any siblings or half-siblings of this child(ren)?							
Is there anything else we should know about this case?							
D. SAFETY CONCERNS							
1. Have you or the other party filed a request for a Restraining Order in the past five years?							
2. Is there a Restraining Order in place now protecting you or the other party?							
3. Are you alleging that there is a history of domestic violence between you and the other party?							
4. If you answered 'YES' to #2 or #3, were any of the children present during the abuse/violence?							
5. Are you requesting a separate mediation session due to a history of domestic violence between you and the other party?							
6. Are there guns/firearms in the home of any of the parties?	If yes, in whose home?						
7. Are you required to be registered as a sex offender under Section 290 of the Penal Code where the victim was a minor?							
8. To the best of your knowledge, is anyone who resides in your household required to register as a sex offender under Section 290 of the Penal Code, as a result of a felony conviction in which the victim was a minor?							
SIGNATURE:	DATE:						

For more information about Family Court Services and mediation, please go to our website at <u>www.saccourt.ca.gov/family/fcs.aspx</u>

Thank you!