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PRACTICE AREA LIMITED TO ADOPTION & CHILDREN'S LAW

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CUSTODY INTAKE FORM

Date: _____

CLIENT INFORMATION

** Please list wife's name as it should appear on legal documents and vital records forms*

Husband's Legal Name: First _____ Middle _____ Last _____

Wife's Legal Name: First _____ Middle _____ Last _____

Wife's Maiden Name: First _____ Middle _____ Last _____

Husband's DOB: _____ Place: _____ Wife's DOB: _____ Place: _____

Marriage Date: _____ City: _____ State: _____

Contact

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Email: _____

Home Phone: _____ Fax: _____ Call first?

Business: (His) _____ Cell: (His) _____

Business: (Hers) _____ Cell: (Hers) _____

Children (If more than 4, please list under Additional Notes at the end of this form)

Name	Date of Birth	Race	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHILD(REN) TO BE ADOPTED INFORMATION

First Child

Full Birth Name: _____ DOB: _____ Gender: _____ Race: _____

Place of Birth: Hospital _____

City _____ County _____ State _____

Date of Placement: _____ City _____ State _____

Guardianship Papers? _____

CUSTODY INTAKE FORM

Second Child

Full Birth Name: _____ DOB: _____ Gender: _____ Race: _____

Place of Birth: *Hospital* _____

City _____ County _____ State _____

Date of Placement: _____ City _____ State _____

Guardianship Papers? _____

BIRTH MOTHER INFORMATION

Birth Mother's Legal Name: *First* _____ *Middle* _____ *Last* _____

Birth Mother's Maiden Name: *First* _____ *Middle* _____ *Last* _____

Were you married to the child's biological father? _____

DOB: _____ Race: _____ Social Security Number: _____

Phone number: _____

Last known address: _____

City: _____ State: _____ Zip: _____

Amount of visitation in the last 3 years: _____

Amount of child support paid in the last 3 years: _____

Is birth mother incarcerated? _____ If so, how long? _____

Which facility is she in? _____

City: _____ State: _____ Zip: _____

Reason for incarceration: _____

Is birth mother in favor of custody? _____

BIRTH FATHER INFORMATION

Legal Name of Birth Father: _____

Married? _____ Spouse's Name: _____

Were you married to the child's biological mother? _____

DOB: _____ Race: _____ Social Security Number: _____

Phone number: _____

Last known address: _____

City: _____ State: _____ Zip: _____

Amount of visitation in the last 3 years: _____

Amount of child support paid in the last 3 years: _____

Is birth father incarcerated? _____ If so, how long? _____

Which facility is he in? _____

City: _____ State: _____ Zip: _____

Reason for incarceration: _____

Is birth father in favor of custody? _____

CUSTODY INTAKE FORM

ADDITIONAL CLIENT INFORMATION

Please list any additional languages that you speak:

Have either of you ever been convicted of a crime? If so, for what were you convicted?

Has there been any record of child abuse in your history? If so, in what state were you accused?

CUSTODY INFORMATION

What is the relationship of the Birth Mother and/or Birth Father to you?

What kind of relationship do the child(ren) have with the birth mother/birth father currently?

How did you gain custody of the child(ren)?

Have you retained any other legal assistance in this matter?

Additional Notes

CUSTODY INTAKE FORM

How did you hear about our office and why have you chosen to retain us?

We hereby give our permission for Raymond W. Godwin, Esq. to use any photos that we send him or his office for use on his website, pamphlets, booklets, or published material.

Digital Signature _____

[CLICK HERE](#)

to attach the completed Intake Form
to an email and send to our office via email at
assistant@scadopt.net