

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

BLYTHE 265 N. Broadway, Blythe, CA 92225
 HEMET 880 n. State St., Hemet, CA 92543

INDIO 46-200 Oasis St., Indio, CA 92201
 RIVERSIDE 4175 Main St., Riverside, CA 92501

RI-FL006

CHILD CUSTODY EVALUATOR (Name and Address) TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____		FOR COURT USE ONLY
PETITIONER: _____ RESPONDENT: _____		CASE NUMBER: _____
HEARING DATE: _____	TIME: _____	DEPARTMENT: _____
CHILD CUSTODY EVALUATOR REPORT		

Attorney for Petitioner: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

Attorney for Respondent: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

On the ordered a evaluation pursuant to Family Code §
 The focus of the evaluation was

<u>Child(ren)'s Full Name</u>	<u>Date of birth</u>	<u>Current age</u>	<u>Gender</u>

Declaration Regarding the Process Followed

On ÁÁ, the court ordered evaluation process was explained
 mother, and the father.

- 1.
- 2.
- 3.

Summary of Current Orders

PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	

New Developments

INTERVIEWS AND INVESTIGATION:

Parents Preference Regarding Child Custody and Visitation

Alienation

Home Visit and Observations

Interview(s) with Child(ren)

Collateral Reports

Evaluator's Assessment

Proposed Recommendations

Respectfully submitted on _____ :
 Pa ^ _____

Declare under penalty of perjury under the laws of the State of California that the information above is true and correct

Date: _____

 (TYPE OR PRINT NAME OF PARTY MAKING DECLARATION)

 (SIGNATURE)