**Joint Parenting Session Contact and Intake Form**

**Your Name:** Click or tap here to enter text.

**Phone:** Click or tap here to enter text. **Email:** Click or tap here to enter text.

**Other Parent’s Name:** Click or tap here to enter text.

Children you have in common with the other parent (please list name and age):

Click or tap here to enter text.

How did you learn about Kids First?

Court/lawyer

Child Support Recovery Unit

DHS

Domestic violence program

Other

Marital status with the other party:

Separated

Divorced

Never married

How you identify:

Caucasian, White

Black, African American

Hispanic, Latina/o, Latinx

Asian, Asian American, Pacific Islander

American Indian, Native American, Native

Mixed Race

Your annual income:

Under $10,000

$10,000 – $19,999

$20,000 – $29,999

$30,000 – $39,999

Above $40,000

Do you have an active Child Support Recovery Unit Case?

Yes

No

Is there a No Contact Order in place between you and the other parent?

Yes

No

*Email this completed form to* [*lauramartin@kidsfirstiowa.org*](mailto:lauramartin@kidsfirstiowa.org)