

**Greene County Visitation Center**

**Supervised Visitation Services**  
**Supervised Visitation and Neutral Exchanges**

**Information Packet**



**Greene County Visitation Center**  
**143 East Market Street**  
**Xenia, OH 45385**  
**(937) 562-5687**  
**(937) 426-1779**

The Greene County Visitation Center is operated by the Family and Children First Department.

Dear Parent,

The purpose of this letter is to provide you with a brief description of the Supervised Visitation Center program and to let you know what information you need to bring with you for the orientation session. You must complete the orientation session before visits or exchanges can begin.

Each party completes the orientation session individually to determine the appropriateness, frequency, timing, and scheduling of the visits or exchanges. The staff of the Visitation Center will do all the scheduling of the visits and exchanges based on what time is available on the program's schedule, the referring agency's request, and input from all parties. A written schedule will be provided to each party once the schedule is developed and agreed to. Currently, the Visitation Center is open for visits and exchanges on Monday, Wednesday, Friday, and Sunday. Administrative hours are from 9:00 to 4:00 Monday through Friday.

**PLEASE COMPLETE THE FOLLOWING**

- 1. Read the enclosed information about the supervised visitation program thoroughly and bring this information with you to the orientation session.**
- 2. Complete the Intake Form completely and return it in the enclosed self-addressed stamped envelope within 5 days.**
- 3. Call the Visitation Center TODAY at 562-5687 to schedule an orientation session.**

**BRING THESE ITEMS WITH YOU TO THE ORIENTATION SESSION**

- 1. Driver's License (or photo I.D.)**
- 2. Total household income**
- 3. This information packet (less the Intake Form mailed to the Center)**
- 4. Health Insurance Card**

We look forward to offering a safe, structured environment for your visit or exchange. Please feel free to ask any questions you might have during your orientation.

## FREQUENTLY ASKED QUESTIONS

### **1. What is Supervised Visitation?**

Supervised Visitation is the provision and maintenance of a safe, neutral setting in which the contact between a child(ren) and an adult (usually a parent) can be monitored by personnel able to protect the rights of the child(ren).

### **2. What is the Greene County Visitation Center?**

The Visitation Center is a Supervised Visitation and Exchange program that offers families a uniquely comfortable, reassuring, and homelike atmosphere in which a safe, structured, neutral alternative to unsupervised visits can be provided.

### **3. What are Supervised Neutral Exchanges?**

Supervised exchanges are for parents who are not required to have supervision while visiting their children, but need to be able to make the exchange without interacting with the other parent. The child is escorted from one parent to the other by a visitation monitor.

### **4. How are families referred to the Greene County Visitation Center?**

Families are referred to the visitation Center in a variety of ways. Domestic Relations or Juvenile Court or the Children Services Board makes referrals.

### **5. What are the grounds for termination of Supervised Visits at the Greene County Visitation Center?**

Supervised Visitation may be terminated at the discretion of the Visitation Center staff if the client does not adhere to the policies set by the Visitation Center, or if the child, another client, or the staff's safety are jeopardized.

## **WHY ARE VISITS IMPORTANT?**

The child is able to maintain a relationship with the non-custodial parent.

The child sees that the non-custodial parent still love him/her and wants to visit with the child.

The visits allow a connection to remain between the non-custodial parent and the child so that the child does not feel abandoned.

The visits allow the child to see the visiting parent is all right, so that the child does not worry about the non-custodial parent's well being.

The visits allow the child to slowly come to terms with the separation or divorce of his/her parents, which can help in the healing process.

## **HELPFUL HINTS TO PREPARE THE CHILD FOR VISITATION**

- ☺ It is important that the child understands that he/she has done nothing wrong and that it is not his/her fault that the supervised visitation must occur.
- ☺ Assist the child in becoming acquainted with the surroundings at the Visitation Center, so that he/she is comfortable with the atmosphere before the visitation begins. It is important that the child knows the staff at the Visitation Center is always available for him/her during the visit.
- ☺ Try to maintain a positive outlook about the visitation yourself. Children are very impressionable and they can sense how their parents are feeling. If they feel that you are comfortable with visitation, they may be more apt to be positive about the visitation themselves.
- ☺ Depending on the age of the child, it may be useful to explain to the child the purpose of the supervised visitations and the safety arrangements. This way, the child can feel informed and feel as though they have some control in the situation.

# Greene County Family Visitation Center

143 East Market Street

Xenia, Ohio 45385

(937) 562-5687

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## POLICIES FOR SUPERVISED VISITATION AND EXCHANGE SERVICES

### Preparing The Child For Visitation or Exchanges

#### Each Parent's Responsibilities To The Child

Help the child understand that he/she has done nothing wrong and that it is not his/her fault that the supervised visitation must occur.

**Custodial Parent** - Assist the child in becoming acquainted with the surroundings at the Family Visitation Center, so that he/she is comfortable with the atmosphere before the visitation begins. It is important that the child knows the staff at the Family Visitation Center is always available for him/her during the visit or exchange, but that staff is not involved in the decision-making process about custody and/or court ordered visitation or exchanges.

Maintain a positive outlook about the visitation yourself. Children are very impressionable and they can sense how their parents are feeling. If they feel that you are comfortable with visitation, they may be more apt to be positive about the visitation themselves.

Using an age-appropriate method, explain to the child the purpose of the supervised visitations and the safety arrangements. This way, the child can feel informed and feel as though they have some control in the situation.

**Non-custodial Parent** - Assist the child to feel comfortable during the visitation or exchange by not pressuring the child with questioning, inappropriate comments about the other parent, discussing adult issues or trying to force the child to demonstrate affection.

### Parking and Entrances

#### *Parking*

**The Non-Custodial Party** will park in the Family and Children First parking lot (158 East Main St. / U.S. 35). Non-custodial parties must not use Market Street when arriving or departing the Family Visitation Center (Use Main Street/U.S. 35)

**The Custodial Party** will park in on-street parking spaces on East Market Street. Please be advised that if you park in a "metered" space, these meters are monitored until 5:00 pm Monday through Friday. The Family Visitation Center cannot give change for the meters nor can the staff exchange bills for coins. When departing the Family Visitation Center, residential parties must leave the area using Market Street to Monroe Street to Church Street. There is no turn on Collier Street to get to Main St./U.S. 35 permitted.

All families must park in designated areas.

Families may not wait in the parking lot/spaces or drive to the other parties parking lot.

### *Which Entrance To Use*

The **Non-custodial Party** will use the side back door off the driveway. They will enter the backyard entrance (adjacent to the Non-custodial parking lot) into the Family Visitation Center backyard and walk along the sidewalk/driveway to the door on side back of the Center (off the driveway).

The **Custodial Party** will use the front door entrance.

### **NO ONE IS TO USE THE FAMILY VISITATION CENTER DRIVE WAY.**

### *If You Are Walking or Being Dropped Off*

If you have someone dropping you off at the Family Visitation Center for visitation, you must use the appropriate parking lot/entrance area. Example: if you are a Non-custodial party that walks to or is dropped off at the Center, you must enter the Family and Children First parking lot, enter the Center's backyard through the parking lot, and walk across the yard to the side back door.

## Orientation

All individuals must complete an orientation before any visitation services can be scheduled. During the orientation and once a year thereafter, all participants agree to complete and sign all program forms and releases. Visitation Services are for the parties designated by the referring agency and will be discussed at the orientation. Additional parties desiring to participate in visitation services must obtain prior approval from the Family Visitation Center (and possibly from the referring agency) and complete and sign all forms, releases and an orientation. Residential parties should inform the staff at orientation if there is a possibility of small children (not involved in supervised visitation services) that may accompany adults during drop-off and/or pick-up. A state issued picture ID is required at orientation.

## Arrivals and Departures

The **Non-custodial Party** will arrive 15 minutes prior to the scheduled visit/exchange time. Exchanges return at the exact time of the end of the visit.

The **Custodial Party** will arrive 5 minutes prior to the scheduled visit/exchange time. When the residential party returns to the Center to pick up the child from a visit or exchange, they must arrive 15 minutes prior to the end of the visit or exchange.

**Individuals who exhibit potentially violent behavior, have a history of violent behavior, or who have consistently violated the Center's policies may be asked to remain at the Center until the other party has left the Family Visitation Center area.**

### *Late and Early Arrival Policy*

A party is considered "Late" or "Early" if the arrival time is more than 5 minutes before or after the above policy indicates is the correct arrival time. If either party arrives more than 15 minutes after the scheduled visit time, the visit or exchange may be cancelled.

**Late or Early arrivals/departures are a violation of the Center's policy. The Family Visitation Center may suspend or terminate visits or exchanges if parties continuously violate this policy**

### **ENTRY TO THE FAMILY VISITATION CENTER**

The Family Visitation Center does not accept individuals that come to the door without scheduled appointments, visits or exchanges. Forms or letters can be faxed to the Center (Fax 937-562-5691)

Doors are kept locked at all times. Ring the doorbell and wait for a staff member to respond via the audio-visual equipment.

Please have your picture ID in hand and available when you come to the door.

A staff member will ask you:

- To identify yourself
- May ask you to hold your ID up to the camera located in the brown box (same as the door bell) located beside the door
- A staff member will ask if you have anything in your possession that is considered a weapon when you come to the door.

There are no purses, personal bags, or cell phones allowed in the Center. Please lock these items in the trunk of your car before coming to the Center.

Due to limited space in our waiting areas, there should be no more than one transporting adult for each visit/exchange. Visitors are not allowed to accompany visiting or transporting parties into the Center. The custodial (residential) parent will leave the Center after drop-off is complete.

All parties must **sign in** upon arrival. Please document the correct time you arrive, not the time of your visit or exchange. Staff will monitor arrival and departure times. If a child accompanies a transporting adult, the adult will sign that child's name below their name.

## **BEHAVIOR WHILE PARTICIPATING IN SUPERVISED VISITS OR EXCHANGES**

**Custodial and Non-custodial** parents/parties **AGREE** that they will remain separate, physically and visually, so that contact between them does not occur (includes transport parties and visitors).

Please respect the confidentiality of the other individuals using the Family Visitation Center.

No adult may physically discipline (spank), or threaten to physically discipline a child during supervised visits or exchanges. Time Outs are an approved method of discipline.

There are no derogatory remarks about either parent/guardian in front of a child tolerated. Inappropriate questioning or discussing the child's family members, school, residence, court cases, counseling, etc. are prohibited and this behavior will result in immediate intervention by staff. Staff will document derogatory remarks or inappropriate questioning.

Whispering, low tone talking, foul language, or swearing are not allowed anywhere on Family Visitation Center premises (inside or outside).

PETS, CHEWING GUM, AUDIO/VISUAL EQUIPMENT, DIGITAL CAMERAS and SMOKING **are not allowed** on the premises of the Family Visitation Center.

No money is to be given to a child and no money will be exchanged through the staff. Gift cards (in lieu of money) are suggested.

No unauthorized messages are to be sent to a parent through the child. The Center will forward important information to the other parent (child activities, illness, medications. etc.)

### **RESTROOM AND DIAPER CHANGING POLICY**

All children will be escorted to the restroom by the Family Visitation Center staff. If the child is old enough to go to the restroom alone, the visiting party has the option to wait in the hall with the monitor or in the visit room. If the child requests or needs assistance, the visiting party may help the child in the restroom as long as there is no previous sexual abuse allegations AND the monitor can see both child and visiting party and their behavior. Visiting parties are responsible to change diapers (unless otherwise directed by staff). All diapers will be changed in the presence of staff and in the designated areas.

## FAMILY VISITATION CENTER STAFF

There is always a minimum of two staff members present in the Center. Families are expected to take guidance and instruction from the staff members that are monitoring visits or facilitating the exchange.

For all non-emergency administrative questions/concerns, contact the Center between the hours of 9:00 am to 4:00 pm Monday through Friday. Do not engage staff in detailed conversations during visit and exchange hours. Use the **“Request, Comment and Concern”** forms available in each waiting area to communicate to staff your needs. You can submit the completed form to a staff member during visit and exchange hours. A follow-up call will be made to discuss your request, comment or concern. You may also e-mail the Center at [gvcv@co.greene.oh.us](mailto:gvcv@co.greene.oh.us) Staff will begin processing requests, comments or concerns forms within 2-3 business days.

## DOCUMENTATION OF VISITS AND EXCHANGES

Written records of observations during supervised visits/exchanges will be maintained by the Family Visitation Center. Monitoring reports will be submitted only to the Courts or referring agency. A summary of the reports goes to the Court or referring agency and each party's attorney.

## CANCELLATIONS, MAKE-UP VISITS AND EXCHANGES, NO SHOWS

Cancellations are to be made 24 hours **prior** to the scheduled supervised visit or exchange. If an emergency arises that affects your scheduled visit or exchange, call the Center as soon as possible. Multiple cancellations may jeopardize the capability to continue to use the supervised visitation program. A reason for cancellation is required.

Make-up visits or exchanges must be requested **within 10 days** following the cancellation. Make-up visits or exchanges will be scheduled **if** there is time available on Center's schedule and at the discretion of the Center's staff. The Center will determine whether make-up visits and exchanges requested more than ten days following the canceled visit or exchange will be scheduled.

**ONE NO SHOW** (where one or both parties do not arrive for the visit/exchange and does not call the Center to cancel a visit or exchange) will jeopardize that family's ability to use the supervised visitation program.

## SUPERVISED VISITS ONLY

Staff will hold individual's keys during supervised visits.

Families will be assigned a specific room to be used during the visit. Families cannot leave the assigned room without prior notification to a staff member.

Prior approval is needed for anything to be brought into the Center during a visit. This includes but is not limited to **TOYS, MOVIES, GIFTS, CARDS, FOOD, BEVERAGES, CAMERAS AND EXCHANGE OF PHOTOGRAPHS OR ONES TO SHARE**. **Please fill out a request form (or call the Center) at least 48 hours prior to the day you would like to bring the item.**

All gifts must come into the Center unwrapped (gift bags with tissue paper are allowed). No toys of destruction or war are allowed. Cards must be unsealed and will be read by staff. All bags (food, toys, etc.) will be checked upon entrance to the Center.

Only "G" rated movies are approved to bring into the Center.

The Family Visitation Center offers numerous items/activities (i.e.: games, books, toys, music, crafts, TV/VCR equipment, etc.) for use by visiting families. Usage is encouraged and respect for property is expected. All parties visiting are expected to clean up toys/equipment used and place them in their proper storage area. If the facility or toys/equipment in the Center are damaged due to lack of supervision or negligence by adult/parent, repair/replacement will be expected.

The Family Visitation Center may end a visit at any time if all policies, procedures and/or house rules are not being followed and/or if it is in the best interest of the child.

## VIOLATIONS OF THE POLICIES AND RULES

The Family Visitation Center *Policies, Procedures and Rules for Supervised Visitation/Exchanges* are in place to ensure that services are rendered in a safe and efficient manner.

### Violations of the **POLICIES, PROCEDURES** and/or **RULES**

- will be noted in the monitoring reports and reported to the referring agency.
- could result in termination from the program
- could involve law enforcement officials when the safety or security of individuals or the program is challenged.

## HOUSE RULES

**If any of the following rules are violated, the local law enforcement agency will be summoned and the referring agency and/or court will be notified.**

**Please initial each line**

\_\_\_\_\_ I understand and agree if I arrive at the Family Visitation Center and am suspected to be under the influence of alcohol or drugs, my visit/exchange will be canceled.

\_\_\_\_\_ I understand and agree not to make any THREAT OF VIOLENCE while participating in supervised visitation services (before, during or after a visit or exchange). This includes but is not limited to fighting, harassment, loitering and/or confrontations with anyone.

\_\_\_\_\_ I understand and agree not to possess any WEAPONS while participating in supervised visits or exchanges. Pocketknives are considered a weapon.

\_\_\_\_\_ I waive the right to carry any concealed weapon onto the Family Visitation Center property (building or grounds). This includes any person licensed to carry a concealed weapon or law enforcement officer involved in the supervised visitation program.

\_\_\_\_\_ I understand that each family at the Family Visitation Center is unique and occasionally additional policies or procedures could be implemented by Family Visitation Center staff to keep children and other participants safe.

**I HAVE READ, UNDERSTAND, AND AGREE TO ABIDE BY ALL THE POLICIES AND HOUSE RULES OF THE GREENE COUNTY FAMILY VISITATION CENTER.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Staff Member**

\_\_\_\_\_  
**Date**

*Revised 6-04*

# Greene County Family Visitation Center

## CAMERA AND PHOTO POLICY

**ALL requests by visiting parties to bring cameras to take pictures while visiting at the Visitation Center must have prior approval from the administration. Please submit a written request form at least 2 working days prior to the desired date you want to take pictures. Approval for cameras is at the discretion of the Visitation Center staff.**

### CAMERAS

- A monitor will keep the camera in his/her possession at all times.
- A monitor will take all pictures.
- Visiting parents/parties are not allowed to take pictures.
- All photo-taking activities will be documented on the report form.
- After the photos have been taken, the monitor will keep the camera at the monitor's desk until the end of the visit. The monitor will return the camera to the visiting parent when that parent is ready to leave the Visitation Center.

### NO DIGITAL CAMERAS, AUDIO OR VIDEO RECORDING EQUIPMENT ALLOWED

### EXCHANGE or VIEWING OF PHOTOS

**ALL requests by visiting parties to bring photos to be exchanged or to be viewed by a child during the visit must have prior approval from the Visitation Center staff. Please submit your request on a Request Form at least 1 week prior to the desired date you want to exchange photos or share the photos with a child. Staff will review photos before the photos are shown to a child. Approval for exchange of photos or viewing photos during a visit is at the discretion of the Visitation Center staff.**

- During check-in for the scheduled visit, give the photos to the monitor to ensure they are appropriate.
- A monitor must facilitate the exchange or viewing of all approved photos.
- The exchange or viewing of photos will be documented on the report form.

# GREENE COUNTY FAMILY VISITATION CENTER

## POLICY ON MAKE-UP VISITS

*The Family Visitation Center does not encourage cancelled visits/exchanges; however we do understand that emergencies and conflicts arise.*

The Family Visitation Center will attempt, but not guarantee, to schedule make-up dates for missed visits. Make-up visits/exchanges will be scheduled if there is time available on the Center's schedule and at the discretion of the Center's staff.

### WHAT TO DO IF A VISIT OR EXCHANGE IS CANCELLED

1. Either party can **request** a make-up date by calling the Family Visitation Center or by turning in a completed "Request Form." These forms are available in both waiting areas.
2. Make-up visits/exchanges must be requested within **TEN** days following the cancelled visit or exchange.
3. It is not the responsibility of the Family Visitation Center staff to automatically schedule make-up visits or exchanges that have been cancelled. In the case of a cancellation made by the Family Visitation Center, make-up visits or exchanges will be scheduled as soon as the Center's schedule allows.
4. If a make-up visit or exchange is cancelled, no additional make-up visit or exchange will be scheduled.

## VIOLATIONS of POLICIES and HOUSE RULES

Following are the violations we currently record and report to the courts or referring agency:

	<b>Adult or Child Violations</b>
1	Sign-in procedure disregarded or incomplete
2	Used wrong entrance (door or street) or parking lot
3	No ID
4	Possession of a weapon at door, but returned to car
5	Brought a concealed weapon into the Visitation Center
6	Brought purse, personal bag, cell phone or other items into Center
7	Brought pet into Visitation Center
8	Did not give keys to staff
9	More than 1 transporting party in waiting area
10	Unauthorized person transported child
11	Attempted to make contact with other party
12	Waited in car or parking lot
13	Parent did not prepare/assist child to feel comfortable for visitation
14	Suspected to be under the influence of alcohol or drugs
15	Brought a wrapped gift
16	Brought toys/movies of violence
17	Brought items w/o prior approval
18	Brought a camera w/o prior approval
19	Brought audio/visual equipment or digital camera
20	Did not respect the confidentiality of others
21	Physical discipline (spank or hit) observed or threatened
22	Deragatory remarks made about other parent/family
23	Inappropriate questioning of child
24	Adult conversation topics initiated by parent
25	Whispering, low tone talking, foul language, swearing
26	Made promises regarding future visitation/living arrangements
27	Chewing gum or smoking on premises
28	Used child to send unauthorized message to other parent
29	Gave money to child
30	Did not encourage respect for toys or equipment
31	Did not clean up visit room or kitchen (when used)
32	Took child to restroom w/o supervision
33	Left visit room without staff notification
34	Would not adhere to additional policies instituted for safety
35	Spoke in a language other than English
36	Engaging staff in detailed non-emergency conversations
37	Disrespectful to staff - language or behavior
38	Ignored staff's request or directives
39	Left the Visitation Center w/o staff notification
40	Confrontation with child
41	Confrontation with staff
42	Made a threat of violence
43	Asked to end visit early
44	Other: see report form for details
45	Late cancellation (made less than 24 hours prior to visit)
46	Early arrival
47	Late Arrival

# Greene County Family Visitation Center Intake Form

Please fill in the following information **COMPLETELY** and return it to:

**Greene County Family Visitation Center, 143 E. Market Street, Xenia, Ohio 45385.**

Date: \_\_\_\_\_

Referred by:  Juvenile Court  Domestic Relations Court  Domestic Violence Court

In which County is the Court or Agency located: \_\_\_\_\_

Are you the  Custodial Parent  Non-Custodial Parent  Other (please specify) \_\_\_\_\_

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street City State Zip

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

When is the best time to contact you? \_\_\_\_\_ May we leave a message at  Home  Cell  Work

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_

Spouse  Significant Other/Partner Name: \_\_\_\_\_

Spouse/significant other/partner Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

<i>DEMOGRAPHIC INFORMATION:</i>					
<b>Marital Status</b>	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widow(er)	<input type="checkbox"/> Separated
<i>(Please check only one)</i>					
<b>Race or Ethnic Group:</b>	<input type="checkbox"/> African American	<input type="checkbox"/> Asian	<input type="checkbox"/> Bi-racial	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic
<i>(Please check only one)</i>					
	<input type="checkbox"/> Native American	<input type="checkbox"/> Other (please specify) _____			
<b>Education Completed:</b>	_____				
<b>Gross Annual <u>Household</u> Income:</b>	_____		<b>Number of people living in your home:</b>	_____	

**TRANSPORTATION INFORMATION** Please list the automobile(s) you will drive (or the automobile(s) driven by the person providing transportation for you:

Year of Car	Make/Model of Car	Color of Car	License Plate Number
Year of Car	Make/Model of Car	Color of Car	License Plate Number

Will you be  walking **OR**  dropped off at the Family Visitation Center?

If being dropped off, who will provide transportation for you? Name: \_\_\_\_\_

Please list the automobile this person will drive in the space provided above.

**HOUSEHOLD INFORMATION**

Please list all children living in the home who will be participating in supervised visits or neutral exchanges:

**CHILD #1**

**Name:** \_\_\_\_\_ **Gender:**     Female     Male  
**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Race or Ethnic Group:**     African American     Asian     Bi-racial     Caucasian     Hispanic  
    Native American     Other (*please specify*) \_\_\_\_\_

**CHILD #2**

**Name:** \_\_\_\_\_ **Gender:**     Female     Male  
**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Race or Ethnic Group:**     African American     Asian     Bi-racial     Caucasian     Hispanic  
    Native American     Other (*please specify*) \_\_\_\_\_

**CHILD #3**

**Name:** \_\_\_\_\_ **Gender:**     Female     Male  
**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Race or Ethnic Group:**     African American     Asian     Bi-racial     Caucasian     Hispanic  
    Native American     Other (*please specify*) \_\_\_\_\_

*If needed, list additional children involved in supervised visitation or neutral exchanges on the back of this page.*

**Please list the names of other children living in the home that will not be involved in supervised visitation or neutral exchanges on the back of this form:**

*Please list additional adults Living in the Home: (Besides yourself and spouse/significant other)*

**ADULT #1**

**Name:** \_\_\_\_\_ **Gender:**     Female     Male  
**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Race or Ethnic Group:**     African American     Asian     Bi-racial     Caucasian     Hispanic  
    Native American     Other (*please specify*) \_\_\_\_\_  
**Relationship to child(ren) involved in supervised visitation or exchanges.**     Mother     Father  
    Stepmother     Stepfather     Grandparent     Other relative     Non-relative

**ADULT #2**

**Name:** \_\_\_\_\_ **Gender:**     Female     Male  
**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Race or Ethnic Group:**     African American     Asian     Bi-racial     Caucasian     Hispanic  
    Native American     Other (*please specify*) \_\_\_\_\_  
**Relationship to child(ren) involved in supervised visitation or exchanges.**     Mother     Father  
    Stepmother     Stepfather     Grandparent     Other relative     Non-relative

*If needed, list additional adults living in the home on the back of this page.*

SCHEDULING AND VISITATION/EXCHANGE INFORMATION:

**What days/hours do you work?** \_\_\_\_\_  
(Visits will be scheduled according to what days and times are available on the Visitation Center Schedule, and the days and times **BOTH** parties are available.)

**Possible days/times for visitation/exchanges:** \_\_\_\_\_

**Explain past visitation or exchange arrangements:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date you last visited with child(ren):** \_\_\_\_\_  I have had no or very little contact with child(ren).  
Month/Year

PLEASE PROVIDE THE FOLLOWING INFORMATION:

**Attorney's Name**

**Name:** \_\_\_\_\_

**Firm:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street City State Zip

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Do you know your next Court Hearing date?**  Yes  No **If yes, give date:** \_\_\_\_\_

**In what County is your hearing being held?** \_\_\_\_\_

**Is there a CASA (Court Appointed Special Advocate) involved with your case?**  Yes  No

**Name:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Is there a Guardian Ad Litem (GAL) involved with your case?**  Yes  No

**Name:** \_\_\_\_\_ Phone Number

**Additional person authorized to transport child(ren) (for custodial parents and exchanges only).** (This party must attend an orientation and complete forms.)

**Name:** \_\_\_\_\_ **Home Phone Number:** \_\_\_\_\_

**Work Phone Number:** \_\_\_\_\_ **Cell Number:** \_\_\_\_\_

**Relationship to child(ren) involved with supervised visits or exchanges:** \_\_\_\_\_

ADULT HEALTH INFORMATION

Do you have any health-related illnesses/conditions/disabilities?  Yes  No

Person's Name	Diagnosis	Limitations
_____	_____	_____
_____	_____	_____

List all medications you take:

Person's Name	Medication	Strength	Dosage
_____	_____	_____	_____
_____	_____	_____	_____

If needed, list additional medications on the back of this page

List all allergies

Person's Name	Allergy	Limitations
_____	_____	_____
_____	_____	_____

DOMESTIC VIOLENCE AND FAMILY VIOLENCE

Is there a history of domestic or family violence between the parties?  Yes  No

Is there a history of stalking?  Yes  No Is there a safety plan?  Yes  No

If yes to any of the above questions, please explain: \_\_\_\_\_

Was anyone ever formally charged with Domestic Violence?  Yes  No

What were the charges? \_\_\_\_\_

Is there a Civil Protection Order (CPO/TPO) in place?  Yes  No

If yes, describe reason for CPO/TPO: \_\_\_\_\_

What County or City Court issued the CPO/TPO: \_\_\_\_\_

Has either party violated the CPO/TPO?  Yes  No If yes, name of person: \_\_\_\_\_

Has the CHILD(REN) witnessed or experienced family violence (hitting, pushing, screaming, yelling, verbal fights, etc.)?

Yes  No

If yes, describe: \_\_\_\_\_

JAIL AND PRISON INFORMATION

Are you on...  probation or  parole? If yes, for how long? \_\_\_\_\_ PO Officer: \_\_\_\_\_

Have either party served any time in jail or prison?  Yes  No If yes, Who? \_\_\_\_\_

Describe what the offense was, the amount of time served and where it was served:

Offense	Dates/Time Served	Where Served
_____	_____	_____
_____	_____	_____

If needed please list additional jail/prison information back of this page.

☺ ***YOU'VE COMPLETED THE INTAKE FORM!*** ☺  
***THE NEXT STEPS ARE...***

- ☺ ***Sign the form where indicated below***
- ☺ ***Contact the Visitation Center at 937-562-5687 for an orientation appointment.***
- ☺ ***Return the form in the self-addressed stamped envelope provided***
- ☺ ***Bring your Driver's License (or photo ID) to the orientation session,).***

I hereby certify the information on this intake form is true and accurate to the best of my knowledge. I agree to allow the Visitation Center to contact emergency medical personnel (911) if needed for my child(ren) or myself. I have listed all medical concerns to which emergency personnel should be made aware.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***FOR OFFICE USE ONLY***

Intake form received by: \_\_\_\_\_  
*Staff Initials* *Date*

Intake form reviewed by: \_\_\_\_\_  
*Staff Initials* *Date*

The Family Visitation Center Supervised Visitation Center and Exchange Program is a program of the Greene County Family and Children First Department.