

## **Late Teen or Adult Child of Divorce Questionnaire For Collaborative Divorce or Reunification Work with Teens or Adults**

Please fill out the following questionnaire and keep a copy for your own reference, and to share with your individual therapist if you have one. Feel free to use the back of these sheets as needed. To help keep costs down, come to your appointment with the questionnaire completed carefully. If you have questions about specific items, please feel free to call me before we meet.

While your parents move through their separation and/or divorce, or after that divorce, I will *not* be serving as your therapist. As an Adult Child Specialist in a Collaborative Divorce, or in Reunification work, I *will* consider, represent and advocate for your reasonable and healthy needs and desires – those that relate to the divorce, as well as *your* future with your parents.

I will only share with them what you allow me to share about your specific information. I *will* share my *own* observations with your parents about what I think they need to be doing or not doing to best support you going forward. They are restructuring or already have restructured your family, while they are also preparing for their own and *your* future. I may ask your parents to fill this form out from *their* perspective about you/themselves.

**Adult Child's Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **DOB** \_\_\_\_\_ **Sex** \_\_\_\_\_

**Siblings' Names & Ages** \_\_\_\_\_

**Parent A's Name** \_\_\_\_\_ **Parent B's Name** \_\_\_\_\_

**Living Arrangement & Address** \_\_\_\_\_

**Study/Employment** \_\_\_\_\_

Financially independent? Y / N Amount of *monthly* financial support provided by each parent or both: **Parent A** \_\_\_\_\_ & **Parent B** \_\_\_\_\_ OR **Both** \_\_\_\_\_

Approximate Hours *each week* you spend directly speaking and engaging with each parent:  
**Parent A** \_\_\_\_\_ & **Parent B** \_\_\_\_\_

What was your academic performance in the last 12 months you attended school/college?  
Outstanding \_\_\_\_\_ Above Average \_\_\_\_\_ Average \_\_\_\_\_ Below Average \_\_\_\_\_

Was there a change in your performance in those last 12 months? Y / N From what to what?  
\_\_\_\_\_

In the past 12 months, have you experienced any significant loss (e.g. Loss of Position, Job, Community, Loved ones, such as a relative, friend, partner, beloved pet), either through death, extended separation, moving away or other circumstances? Y / N Please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you explain the quality of your *academic or work* performance in the last 12 months?

---

---

How many schools/academic institutions did you attend *before* graduating from High School?

---

How many friends would you say that you see or interact with on a regular, weekly or monthly basis, either by speaking directly on the phone or in person (*not* text or email)?

None \_\_\_\_\_ One \_\_\_\_\_ 2-4 \_\_\_\_\_ 5-7 \_\_\_\_\_ More than 7 \_\_\_\_\_

Do you currently have a “best” friend? Y / N A committed romantic partner? Y / N M / F

In the last 6 months, how many times, on average, would you say that you have sex in a week?

---

In the last 6 months, how have you been most likely to spend your free time? \_\_\_\_\_

---

If you had to select *three things about yourself* that you appreciate most and are most proud of (e.g. way of being, personal activity, accomplishment, event, skill), what would that be? \_\_\_\_\_

---

---

On a scale of **1** (= Immobilized/Paralyzed) to **10** (= Stress Free) how easily do you *usually* handle changes in your life? (e.g. changing jobs, schools, living arrangements, schedules, plans)

---

What do you do to help yourself during difficult/challenging transitions or changes? \_\_\_\_\_

---

As a young child, or currently, did you ever struggle with any of the following:

Past = P More Recently = R Please **indicate P and/or R** for each that apply,

And please **make clarifying notes in the margin.**

Tantrums . . . . . \_\_\_\_\_

Emotional Outbursts/escalation . . . . . \_\_\_\_\_

Rejected or made fun of by peers . . . . . \_\_\_\_\_

More sensitive or stronger emotional reactions than peers . . . . . \_\_\_\_\_

Bullied or Manipulated by peers . . . . . \_\_\_\_\_

Shyness . . . . . \_\_\_\_\_

Nightmares . . . . . \_\_\_\_\_

Bedwetting or soiling at night . . . . . \_\_\_\_\_

Trouble making friends . . . . . \_\_\_\_\_

Aggressive, picking fights . . . . . \_\_\_\_\_

Serious discipline problems at school . . . . . \_\_\_\_\_

Causing harm to other children/animals . . . . . \_\_\_\_\_

- Breaking laws – e.g. shoplifting, window breaking . . . . . \_\_\_\_\_
- Argued a lot – with whom? . . . . . \_\_\_\_\_
- Opposed authority figures . . . . . \_\_\_\_\_
- Difficulty asserting your needs/desires effectively . . . . . \_\_\_\_\_
- Acted young for your age . . . . . \_\_\_\_\_
- Inadequate parental supervision & guidance . . . . . \_\_\_\_\_
- Inadequate parental support for your independence . . . . . \_\_\_\_\_
- Felt physically unsafe . . . . . \_\_\_\_\_
- Ongoing trouble concentrating/ being “present”. . . . . \_\_\_\_\_
- Restless, unable to sit still, hyperactive . . . . . \_\_\_\_\_
- Complained of loneliness . . . . . \_\_\_\_\_
- Seemed sad, unhappy or depressed . . . . . \_\_\_\_\_
- Trouble separating from parents/caregivers . . . . . \_\_\_\_\_
- Trouble falling asleep or staying asleep . . . . . \_\_\_\_\_
- Felt compelled to lie frequently . . . . . \_\_\_\_\_
- Eating too much or too little . . . . . \_\_\_\_\_
- Suicidal thoughts, thoughts of hurting yourself . . . . . \_\_\_\_\_
- Self-injurious behavior – e.g. cutting, picking scabs . . . . . \_\_\_\_\_
- Anxious frequently . . . . . \_\_\_\_\_
- Fearful or extremely timid . . . . . \_\_\_\_\_
- Refused to go to school . . . . . \_\_\_\_\_
- Clung to parent(s) or caregiver(s) . . . . . \_\_\_\_\_
- Destroyed/damaged own property . . . . . \_\_\_\_\_
- Destroyed/damaged others’ property . . . . . \_\_\_\_\_
- Accident prone – got hurt a lot . . . . . \_\_\_\_\_
- Sex too young, or with too many partners . . . . . \_\_\_\_\_
- Sexual abuse . . . . . \_\_\_\_\_
- Dramatic difficulties with changes in routines or schedules . . . . . \_\_\_\_\_
- Abuse of non-prescription drugs/alcohol . . . . . \_\_\_\_\_
- Anorexia / Bulimia - symptoms . . . . . \_\_\_\_\_
- Violated your own values in more than one way . . . . . \_\_\_\_\_
- Physical symptoms without known medical causes:  
 \_\_\_ Headaches \_\_\_ Stomach aches \_\_\_ Nausea/vomiting \_\_\_ Rashes/Skin problems \_\_\_  
 Other: \_\_\_\_\_

What, if anything, do you know about the circumstances of your parents’ separation or divorce?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did your parents tell you separately or together that they were going to separate or divorce?

\_\_\_\_\_

How was that for you? \_\_\_\_\_

\_\_\_\_\_

To what extent (**0**=Not at all ; **10**=Constant Pressure), if any, do you feel pressured to take sides? **Parent A** \_\_\_\_\_ **Parent B**\_\_\_\_\_

If they are pressuring you, what do you think it would take for each of them to stop?

**Parent A:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent B:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In a few words, what is *your own view* about how their separation/divorce came about? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What concerns you most about their separation/divorce? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How do you think their separation/divorce *may* impact *YOU* unfavorably? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

When you imagine wanting to include *both* of your parents at your graduation, your wedding, their grandchild's baby shower or other future events, what do you imagine *could* be hard or stressful for you? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What do you *most wish that each of your parents understood*, that you think they don't:

**Parent A:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent B:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In what ways might you actually *benefit* from your parents' separation or divorce? What might be better for you? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Use 2 words that *most accurately* describe the *quality of your relationship* with each of your siblings? (e.g. tense, distant, loving, superficial, competitive, protective, defensive, guarded, kind, generous, etc.)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ 2 word description of rlshp: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ 2 word description of rlshp: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ 2 word description of rlshp: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ 2 word description of rlshp: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ 2 word description of rlshp: \_\_\_\_\_

How do you imagine that your relationships with each of your parents affect your relationship(s) with your sibling(s)? \_\_\_\_\_

\_\_\_\_\_

Who are other relatives, extended family members and special family friends that have been especially important to you growing up in your family? \_\_\_\_\_

\_\_\_\_\_

How do you imagine the separation/divorce may/has impact/ed these relationships? \_\_\_\_\_

\_\_\_\_\_

How would you like to see your parents handle those extended family and friend relationships in a way that works for everyone? \_\_\_\_\_

\_\_\_\_\_

**PARENT A =** \_\_\_\_\_

What do you see as **Parent A's** strengths as a parent/person? \_\_\_\_\_

\_\_\_\_\_

What do you imagine that **Parent A would say** are his/her strengths as a parent/person? \_\_\_\_\_

\_\_\_\_\_

How have **Parent A's** strengths affected you? \_\_\_\_\_

\_\_\_\_\_

What do you see as **Parent A's** weaknesses as a parent? \_\_\_\_\_

\_\_\_\_\_

What do you imagine that **Parent A would say** are his/her weaknesses? \_\_\_\_\_

\_\_\_\_\_

How have **Parent A's** weaknesses affected you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What characteristics do you have in common with **Parent A**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine may have been the most enjoyable times *for Parent A* with you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has been the most enjoyable time *for you* with **Parent A**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine has been the *most satisfying for Parent A* about parenting *you*, in particular? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine has been the *most challenging for Parent A* about parenting you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has been the most challenging *for you* about being parented by **Parent A**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARENT B =** \_\_\_\_\_

What do *you* see as **Parent B's** strengths as a parent? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine that **Parent B would say** are his/her strengths as a parent? \_\_\_\_\_  
\_\_\_\_\_

How have **Parent B's** parental strengths affected you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do *you* see as **Parent B's** weaknesses as a parent/person? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine that **Parent B would say** are his/her weaknesses? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How have **Parent B's** weaknesses affected you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What characteristics do you have in common with **Parent B**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine may have been the most enjoyable times *for Parent B* with you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What have been the most enjoyable times *for you* with **Parent B**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine has been the *most satisfying for Parent B* about parenting *you*, in particular? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you imagine has been the *most challenging for Parent B* about parenting you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has been the most challenging *for you* about being parented by **Parent B**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any, would you say are the major disagreements your parents had or still have regarding childrearing and parenting? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any, are some ways that your parent(s) rely on you to be a "friend" or "sounding board"? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if any, are ways that your parent(s) expect you to help them to agree about things? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On a Scale of 1-10 (1= Not at all , 10= Constantly), to what extent does **Parent A** criticize or badmouth Parent B in your presence? \_\_\_\_\_ How do you think this affects you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On a scale of 1-10 (1= Not at all , 10= Constantly), to what extent does **Parent B** criticize or badmouth Parent A? \_\_\_\_\_ How do you think this affects you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you imagine your parents' behaviors in their marriage and divorce already impact or may impact how *you* behave in your love relationships? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are 3 hopes you have for your relationship with **Parent A** in the future? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are 3 hopes you have for your relationship with **Parent B** in the future? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are 3 hopes you have for your relationship with your **Sibling** (s) and restructured family in the future? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you could speak from the heart, *without any negative consequences*, what would you most want **Parent A** to hear: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you could speak from the heart, *without any negative consequences*, what would you most want **Parent B** to hear: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anything you noticed/discovered that you hadn't before, as you filled out this form?  
\_\_\_\_\_  
\_\_\_\_\_

Anything you noticed that's upsetting about filling this out? (list here) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anything that came as a relief while filling out this form? (list here) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you! Feel free to add any other information you would like me to have and consider . . .*