



Paternity Questionnaire

This document can be used in the Eastern Shoshone & Northern Arapaho tribal court as evidence to determine the Father of the child.

All of the information you provide is totally confidential and will be used only to establish a legal father for your child. This is so important that if I shared anything you tell today for any other reason, I could lose my job.

Although some of the questions are quite personal, it is not meant to embarrass, judge or criticize you. As I said, this is only to ensure your child has a legal father.

Do you have any questions or concerns that need to be answered before we begin?

(Review the application for completeness & request further information if needed before starting the interview)

1. Is _____ your only child? (If other children write down their names, birth dates, and father's name(s)). _____
2. Is this child enrolled in a federally recognized Tribe? ☐ Yes ☐ No
Which Tribe? _____
3. Where was this child conceived? _____ Is this on a Reservation? ☐ Yes ☐ No
4. When was this child conceived? _____
When was your last period before you became pregnant? _____
5. When did the Doctor say this child was due? _____
Did the Doctor say he/she was premature? ☐ Yes ☐ No
6. Have you signed a paternity affidavit with the man you believe to be the father? ☐ Yes ☐ No
(if yes when and where) _____
7. Do you have a certified birth certificate for this child? ☐ Yes ☐ No
Is any one named as the father on the birth certificate? ☐ Yes ☐ No
If yes, please state name: _____
8. When and where did you meet the man you believe to be the father? _____
9. What was your relationship with him? Dated: ☐ Yes ☐ No lived together ☐ Yes ☐ No
casual acquaintance ☐ Yes ☐ No married ☐ Yes ☐ No 1 time acquaintance ☐ Yes ☐ No
Other? _____
10. During what time period did you have sexual relations with this man? _____
11. Did you tell him you were pregnant? ☐ Yes ☐ No what was his reaction? _____

Did he think he was the father also? ☐ Yes ☐ No

12. Has he provided any support for the child? ☐ Yes ☐ No What has he done? _____

13. Please give a list of the names, addresses, and phone numbers of any men you had relations with in the month before, during, and after you believe your child was conceived. Also, please note when and where (on a reservation) you had sexual contact with each man.

The information I have provided is true and correct to the best of my knowledge. If there is any other information I will contact the ESCSP with the new information.

Applicants Signature Date

Dated this _____ day of _____, _____

Subscribed and sworn before me on this _____ day of _____, _____

Notary/Court Clerk
My commission number: _____
My commission expires: _____