Tarrant County Family Court Services Advisement Form

Your name: Cause No
Child(ren)'s names:
I, the undersigned, understand that services conducted by Family Court Services have been ordered by the Court.
I further understand that information shared with the caseworker is for the purpose of assisting the Court in making a decision that is in the best interest of the child/children.
I have been informed and I understand that any communications or statements I make will not be privileged or confidential in the context of this litigation and I understand specifically that:
• The caseworker may be required to testify in Court about my case and what information was gathered during interviews, collateral contacts, and documentation.
• The caseworker may be required to make a report, either written or oral, to the Court and to the attorneys. A written report will not be provided to me, although I may review the report with my attorney. My attorney is prohibited from providing a copy to me.
• As part of the investigation, the caseworker may confer with mental health professionals, doctors, teachers, childcare personnel, other governmental entities and other professionals, individual persons or agency representatives who have information related to me, my children, or other parties to this litigation.
Subject child(ren)'s audio/visually recorded interviews - As required by Texas Family Code §107.112 (b-1), FCS will create an audiovisual recording of each interview with subject child(ren) when conducting custody evaluations. Any questions or concerns with recorded interviews should be directed to your attorney.
All information gathered in the investigation may become public record.
Signature
Printed name

Date