



State of Connecticut
Department of Social Services

Date of Interview:

W-348A
(Rov. 12/07)

Non-Custodial Parent's Information Sheet

Custodial Party

Last Name _____ First _____ M.I. _____
Date of Birth _____ CLID# _____
Relationship to Dependents _____
Is this a child only medical case and the custodial party wants child support? [] Yes [] No
If this application is child only and the answer is no, custodial party does not want to pursue child support, STOP here.

If the Head of Household is not the biological parent, please provide:

Name of Parent: Last _____ First _____ M.I. _____
AU # _____ CLID# _____
Name of Parent: Last _____ First _____ M.I. _____
AU # _____ CLID# _____

Non-Custodial Parent

Last Name _____ First _____ M.I. _____
SSN _____
Address _____ [] Present [] Last known
Place of Birth: City _____ State _____ Date of Birth _____
Place of Death: City _____ State _____ Date of Death _____
Employer Name _____ [] Current [] Former
Employer Address _____
Trade/Profession in last 5 yrs _____
Receiving Public Assistance? [] Yes [] No CLID# _____
Currently Incarcerated? [] Yes [] No If yes, where? City _____ State _____
Military Service: Branch _____ Approximate Dates of Service _____
School Attended: Name _____ Dates Attended _____
City _____ State _____
Vehicle: Make _____ Model _____ License Plate # _____
Mother's Name: Last _____ First _____ M.I. _____
Address (if living) _____
Father's Name: Last _____ First _____ M.I. _____
Address (if living) _____

Court Orders

Are there any court orders? Yes No City _____ State _____
 (Attach copy if available) Date _____ Docket or Case # _____

Dependent(s) of the Non-Custodial Parent

Dependent's Name	DOB	Was mother legally married at time of birth?		To Whom? Date?	Has paternity been established?		Attached	
		Yes	No		Yes	No	VS-56	Birth Cert.

Comments
