

**South Carolina Department of Social Services**  
**FATHER INVOLVEMENT AND MARRIAGE QUESTIONNAIRE**

FI Participant Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Child/Children: (if same father) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. Do you share parenting responsibilities with your child's father?

(Do you talk to him before making any decisions regarding your child's education, discipline, health, safety or well-being?)

Yes  No If no, why not? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. How often does your child see his/her father?  One or more times a week  Less than once a month

Once or twice a year  Other: (specify) \_\_\_\_\_

3. Does your child spend time alone with his/her father?  Yes  No

If yes, how much time on average? \_\_\_\_\_

4. What type of activities does your child participate in when he/she is with his/her father? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Does your child's father attend school activities? (if applicable)  Yes  No

6. Do you have a good relationship with your child's father?  Yes  No

If no, why not? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Does your relationship with your child's father interfere with his relationship with the child?  Yes  No

If yes, why? \_\_\_\_\_

\_\_\_\_\_

8. Have you ever been married to your child's father?  Yes  No

If no, have you ever considered marriage to him?  Yes  No If no, why not? \_\_\_\_\_

\_\_\_\_\_

9. Does your child have anyone (not their father) that they consider a father figure?  Yes  No

If yes, what is that person's relationship to you? \_\_\_\_\_

10. Do you feel that it is important for your child to have a relationship with his/her father?  Yes  No

If no, why not? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Case Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_