



**CHEROKEE NATION OFFICE OF CHILD SUPPORT SERVICES
HUMAN SERVICES DIVISION**

Locate Questionnaire

This form is to assist in gathering information on the non-custodial parent's (NCP) current situation by obtaining specific information needed to work your case efficiently. Please complete the following questions in as much detail as possible and return the form to Cherokee Nation Child Support Services at P.O. Box 557; Tahlequah, OK 74465 or email to: CN_OCSS@cherokee.org

Personal Information		
NCP Name:		
Age:	Social Media: Yes No	Phone:
Nick Names NCP goes by:	FB Name:	Alt. number NCP can be reached:
	Instagram Name:	
	Alternate Social Medias:	
Directions to current address:		
Alternate address or family members address:		
City:	State:	ZIP Code:
Age:	Picture Attached: Yes No	Does NCP have a vehicle?
Race:		Make:
Height:	Tattoos/Scars: please describe:	Model:
Hair:		Color:
Eyes:		Tag:



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Job Information

Current or past employer:		Job Title:
Employer address:		How long?
City:	State:	Zip code:
Phone:	Days/Hours Typically worked:	E-mail:
Highest Level of Education/Certification:	Contract Working/Gigs:	Any Job Training Completed:

Custodial Parent's Child (ren) Information On This Case

Name	Age	M/F	Tribal Affiliation	Physical Location of Child(ren)'s Conception	County

Additional Requested Information

Does NCP have a significant other? If so, please list their name:
Does the significant other work? If so, Please list their employer:
NCP email:
Does NCP stay with their parents?
Where do they live?
Does NCP have any other children?
Does NCP have any other child support cases?



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REVIEW

Additional information is anything you believe will help us locate the NCP:

***Please email pictures of the non-custodial party to:
CN_OCSS@cherokee.org or text pictures to 918-316-1245 along with their full name.***

Type your name here:

Client Signature:

Date: _____

Case Manager/CSR Signature: _____

Date: _____

Actions completed by CM/CSR:

Case Manager/CSR Signature: _____

Date: _____

If you do not have Adobe Reader

Instructions: Please save your locate questionnaire, and email the completed form to childsupport1@cherokee.org

By checking this box, you are admitting that everything listed here is believed to be true, and is completed to the best of your knowledge.

Select this box to submit.
If you do NOT have Adobe Reader, please see **instructions**