

CLIENT INTAKE SHEET

Date of Intake:

How did you hear about us (referral, internet search, etc.): _____

Name: _____

Primary telephone number: _____

Secondary number: _____

EMAIL Address: _____

Type of matter that you need assistance with:

(i.e. Criminal, Civil Service, Etc.): _____

Brief description of legal issue: _____

Who needs representation? (self or other): _____

Date of Incident: _____

Criminal Representation:

Have you been contacted by police or law enforcement agency?

If so, date _____

How contacted (phone, home, letter/card) _____

Name of law enforcement Agency _____

Have you or your loved one been arrested: _____

Next Court Appearance: _____

County of Court: _____

Charges: _____

Civil Service Representation:

Type of matter (Disciplinary, Medical Separation, Investigative Interview, Appeal)

Have you been served with any documents? _____

If yes, type of document? _____

When served? _____

Is there a deadline for a response? _____

If yes, when? _____

Employer: _____

Status: _____

(Tenured Civil Servant, Probationary, Non-Competitive, Provisional, Etc.)

Date of hire: _____

If you have been served with disciplinary charges, list the charges:

County where representation needed: _____

Other Representation

Brief Description: _____

