

CLIENT INTAKE FORM

Name: Date of Birth:	Personal Information					
Phone Number:						
Civil Status Single	Date of Birth: Country of Citizenship:					
Civil Status Single	Phone Number:	E-ma	ail:			
Civil Status Single	Please describe services vou					
Single Married Divorced Widowed How many children do you have: Major Occupation What date you last arrival in the USA? Your occupation? What was your visa status on arrival? Are you authorized to work in the USA? What is your current visa status? Expiration date of your current status? Do you have immediate relative in the USA? Do you have employer that is ready to sponsor you for any work visa? Yes/ No Has anyone ever filed an immigration petition on your behalf? Yes/ No Have you ever been deported? Yes/ No Have you been the victim of a crime in the U.S.? Yes/ No Do you have US ID or Driver license? Yes/ No Preferred Method of Contact with our Office? Email Call Text Criminal History Have you ever been convicted or arrested? Yes/ No						
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CRIME SENTENCE COURT NOTES		or arrested?	\square Yes/ \square No			
	CRIME	SENTENCE	COURT		NOTES	
Client Signature Date	Client Signature		Date			