

Northwestern Alliance, INC

12322 Hwy 99, Bldg. E, Suite 219 Everett WA, 98204

Office: +1 (425)347-7513 Fax: +1(425)265-7593

<https://tmnorthwesternalliance.com/>

CLIENT INTAKE FORM

Personal Information

Name: _____

Date of Birth: _____ County of Citizenship: _____

Phone Number: _____ E-mail _____

Please describe services you are interested in:

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Civil Status

Single

Married

Divorced

Widowed

How many children do you have: _____

Major Occupation

Are you interested in employment services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Your occupation	
How many years of experience do you have?	
Are you authorized to work in the USA?	
What was your current visa status?	
Expiration date of your current status?	

Do you have immediate relative in the USA?

Yes/No

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 fear going back to your Country?

Yes/No

Do you have US ID or Driver license?

Yes/No

Criminal History

Have you ever been convicted or arrested?

Yes/No

CRIME	SENTENCE	COURT	NOTES

Client Signature

Date