

DATE: _____

CLIENT INTAKE QUESTIONNAIRE
(Divorce and Family Cases)

Name: _____ Social Security #: _____

Address: _____ Date of Birth: _____

_____ D. L. #: _____

E-mail: _____ Phone: Home _____

Cell _____

Employer: _____ Work _____

_____ Occupation: _____

_____ Phone: _____

_____ Fax: _____

ADDITIONAL CONTACT INFORMATION

Emergency Contact: _____ Phone: _____

Emergency Contact: _____ Phone: _____

ADDITIONAL INFORMATION

Type of Matter: _____

Matter Name and Case Number: _____

INFORMATION ABOUT CHILDREN

<u>Name</u>	<u>Date of Birth</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDITIONAL INFORMATION

For Pre-Judgment Cases (Divorce not Finalized)

Date of Marriage: _____ **Place of Marriage:** _____

Date of Separation: _____ **County of Marriage:** _____

Number of Marriages: _____ **Education Completed:** _____

Maiden Name (self/spouse): _____

Spouse's Name: _____ **Spouse's Phone:** _____

Address: _____ **Spouse's SSN:** _____

_____ **Spouse's DOB:** _____

Number of Marriages: _____ **Education Completed:** _____

Spouse's Employer: _____ **Occupation:** _____

Address: _____ **Phone #:** _____
