

CHILDHOOD & PARENTING

INTAKE FORM: For Parents Seeking Legal Representation on Behalf of Their Child

If your child is facing a juvenile court hearing, he or she needs experienced legal representation to ensure the best possible outcome. To get things started, your child's attorney will need some basic information about you and your child. Be prepared to share the following information at your first meeting with your child's lawyer. If you are married, both parents can complete the relevant portions of the same form. If you are not married, or if the other parent is not involved, complete just those portions that apply to you.

INFORMATION ABOUT THE CHILD

Child's Name _____

Child's Date of Birth _____

Child's Social Security Number _____

Child's Address _____

_____ County

With whom does your child reside? _____

Does your child attend school? Yes _____ No _____

Name of school _____

Does your child have a job? Yes _____ No _____

Name and address of child's employer _____

Is your child currently in the custody of juvenile authorities? Yes _____ No _____

Describe the circumstances that led you to seek legal representation on behalf of your child.

List the names of any other persons who may have first-hand knowledge of these events, and the best way to contact them. _____

Do you consider the charges that have been raised against your child to be true?

Yes _____ No _____

Why or why not? _____

Does your child consider the charges that have been raised against him or her to be true?

Yes _____ No _____

Why or why not? _____

Has your child previously been charged with an offense? Yes _____ No _____

If yes, explain: _____

What was the outcome? _____

Does your child have a history of mental illness? Yes _____ No _____

If yes, explain: _____

Does your child have a history of alcohol or drug abuse? Yes _____ No _____

If yes, explain: _____

INFORMATION ABOUT THE PARENTS

MOTHER

FATHER

Name _____

Date of Birth _____

Address, Including County

Home Telephone Number _____

Work Telephone Number _____

Facsimile Number _____

E-mail Address _____

Best Way/Time to Reach _____

Employer _____

Position _____

Employer's Address

Are you currently married to each other? Yes _____ No _____

Have you ever been married to each other? Yes _____ No _____

Other Children

| <i>Name</i> | <i>Date of Birth</i> | <i>Residing with Whom?</i> | <i>Child of Mother, Father, or Both?</i> |
|-------------|----------------------|----------------------------|--|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Other Important Information

Questions to Ask My Attorney

