



JULIA BANCROFT, PC
FAMILY LAW

CLIENT INTAKE FORM

Client Name: _____

Date: _____

Please fill out this questionnaire and return it as soon as possible. It is important that you complete each question in detail. Once completed, please save in pdf version before returning via email or uploading through the Bancroft Family Law MyCase portal.

It is imperative that you be **candid!**

You should answer all questions relevant to your case. If a question does not apply to your particular situation, please indicate by marking "N/A". If the answer to any question requires more space than has been provided on the form, please complete your answer on a separate sheet: Refer to the question number to which your answer applies and attach your answer to this form.

Your responses to these questions will help organize your case and will save you money on attorney's fees in trying to gather and assemble information after the case is in progress.

Since your answers are being made to an attorney, you are assured of confidentiality and are protected by the attorney-client privilege.

NOTICE OF CONFIDENTIALITY

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY- CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF CIVIL EVIDENCE.

THE CONTENTS OF THIS DOCUMENT CONSTITUTE ATTORNEY WORK PRODUCT.

THE CONTENTS OF THIS DOCUMENT ARE CONFIDENTIAL AND ARE NOT TO BE DISCLOSED TO THIRD PERSONS OTHER THAN THOSE TO WHOM DISCLOSURE IS MADE IN FURTHERANCE OF THE RENDITION OF PROFESSIONAL LEGAL SERVICES.

CLIENT INTAKE FORM

ABOUT YOU:

- 1) Please provide your **FULL** name, date and place of birth, social security and driver license number.

Full Name: _____ Birth Date: _____

Where born: City: _____ County: _____ State: _____

Social Security Number: _____ Driver's License Number/State: _____

- 2) Where are you living now, and what is your phone numbers and email address?

Address: _____ City: _____ County: _____ State: _____ Zip Code: _____

Phone #: _____ Email: _____

How long have you lived in Texas? _____ County? _____

- 3) At what address do wish you receive your mail from this office? _____

How do prefer that we contact you? Phone or Email? _____

Phone #: _____ Email _____

- 4) Who referred you to this office? _____

- 5) Have you consulted or retained any other attorneys on this matter before coming to this office? _____

If so, who and when? _____

- 6) Please complete the following information concerning your employment.

Employer: _____

Job Title: _____

Work Address: _____ City, State, Zip: _____

Work Number: _____ May we call you at work? _____

Gross Annual or Monthly Salary: _____

Length of Employment: _____ Education Level: _____

ABOUT YOUR CURRENT SPOUSE/PARTNER:

- 1) Please give your current spouse's or significant other's **full** name, date and place of birth, and social security and driver's license number.

Full Name: _____ Birth Date: _____

Where born: City: _____ County: _____ State: _____

Social Security Number: _____ Driver's License Number/State: _____

- 2) Where is your spouse living now, and what is their phone numbers and email address?

Address: _____ City: _____ County: _____ State: _____ Zip Code: _____

Phone #: _____ Email: _____

How long have they lived in Texas? _____ County? _____

- 3) Please complete the following information concerning your spouse or ex-spouse's employment.

Employer: _____

Job Title: _____

Work Address: _____ City, State, Zip: _____

Work Number: _____ May we call them at work? _____

Gross Annual or Monthly Salary: _____

Length of Employment: _____ Education Level _____

ABOUT YOUR MARRIAGE AND SEPARATION:

- 1) Please give the date and place of your marriage.
- a. Date: _____ Place: _____
Are you currently separated from your spouse? _____
If so, please state the date of separation: _____
- b. Have you seen a marriage counselor? _____
- c. If so, please state name: _____
- d. What is your religious preference? _____
If none, are you agnostic or atheist? _____
- e. What is your spouse or ex-spouse's religious preference? _____
- f. Check as appropriate if your marital difficulties involve any of the following:
_____ Drugs/Alcohol _____ Sexual Disappointment _____ Infidelity
_____ Financial Dispute _____ Physical Violence _____ Religion
_____ Incompatibility _____ Other
- 2) How long have you lived in Texas? _____
- 3) In which county do you reside? _____ How long have you resided in this county? _____
- 4) Have you or your spouse ever filed for divorce? ___ If so, when and where? _____
- 5) Does your spouse or ex-spouse have an attorney? _____ If so, who? _____
- 6) Have you ever been married before? _____ If so, how many times? _____
- 7) Do you or your **CURRENT SPOUSE** have any children? _____

Please give the full name, date and place of birth, sex and Social Security number of each such child with your CURRENT SPOUSE:

Full Name: _____

Sex M/F: _____ Birth Date: _____ State where born: _____

Social Security Number: _____

Full Name: _____

Sex M/F: _____ Birth Date: _____ State where born: _____

Social Security Number: _____

Full Name: _____

Sex M/F: _____ Birth Date: _____ State where born: _____

Social Security Number: _____

Where and with whom do these children live? _____

Full Name: _____

Sex M/F: _____ Birth Date: _____ State where born: _____

Social Security Number: _____

IF you have additional marriage(s) or children please complete the following section:

- 8) Do you or your **EX-SPOUSE/EX-PARTNER** have any other children for whom a duty of support is owed? _____
Please give the full name, date and place of birth, sex and Social Security number of each such child with your EX-SPOUSE/EX-PARTNER else:

Full Name: _____
Sex M/F: _____ Birth Date: _____ State where born: _____
Social Security Number: _____

Full Name: _____
Sex M/F: _____ Birth Date: _____ State where born: _____
Social Security Number: _____

Full Name: _____
Sex M/F: _____ Birth Date: _____ State where born: _____
Social Security Number: _____

Full Name: _____
Sex M/F: _____ Birth Date: _____ State where born: _____
Social Security Number: _____

- 9) Do you pay/receive child support? _____ If so, how much? \$ _____ per _____
10) Does your ex-spouse partner pay/receive child support? ___ If so, how much? \$ _____ per _____
11) If a divorce is granted, should the wife's maiden name be restored? _____
12) If so, what name should be used? _____