

# KADENA LEGAL OFFICE INTAKE FORM

**INSTRUCTIONS TO CLIENT(S): PLEASE FILL OUT ALL BLOCKS OF THIS FORM BEFORE MAKING AN APPOINTMENT.**

<b>DATE:</b>		<b>CLIENT CATEGORY</b>		
<b>NAME (Last, First, MI):</b>		<b>GRADE:</b>	<b>RANK:</b>	<input type="checkbox"/> N/A
		<input type="checkbox"/> AD <input type="checkbox"/> ADFAM <input type="checkbox"/> RET <input type="checkbox"/> RETFAM <input type="checkbox"/> CIV <input type="checkbox"/> CIVFAM		
<b>OTHER LAST NAMES:</b>		<input type="checkbox"/> OTHER:		
<b>FIRST VISIT</b> <input type="checkbox"/> <b>RETURNING CLIENT</b> <input type="checkbox"/>		<b>WORK PHONE:</b>		
<b>EMAIL ADDRESS:</b>		<b>CELL PHONE:</b>		
<b>LOCAL MAILING ADDRESS:</b>		<b>STATE OF RESIDENCE:</b>		
<b>BRANCH OF SERVICE:</b> <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Marine Corps <input type="checkbox"/> Navy <input type="checkbox"/> DOD Civilian				
<b>DOD ID:</b>		<b>ID EXPIRATION DATE:</b>		
<b>MARITAL STATUS</b> <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED	<b>IF SEPARATED, LIST DATE:</b>	<b>SPOUSE'S NAME (Last, First, MI)</b>		
		<b>OTHER NAMES:</b>		
		<b>SPOUSE INFORMATION</b>		
		<b>GRADE:</b>	<b>RANK:</b>	<input type="checkbox"/> N/A
<b>LEGAL NEEDS/ISSUES:</b> <input type="checkbox"/> Marriage <input type="checkbox"/> Notary <input type="checkbox"/> GPOA/SPOA <input type="checkbox"/> Certified Copy <input type="checkbox"/> Wills/Estate Planning <input type="checkbox"/> Naturalization/Immigration <input type="checkbox"/> Divorce/Separation <input type="checkbox"/> Custody <input type="checkbox"/> Adoption <input type="checkbox"/> Paternity <input type="checkbox"/> Name Change <input type="checkbox"/> Non-support <input type="checkbox"/> Property/Landlord Tenant <input type="checkbox"/> Military Rights/Benefits <input type="checkbox"/> Consumer Fraud/Abuse <input type="checkbox"/> Creditor/Debtor <input type="checkbox"/> Tax Law <input type="checkbox"/> Other <b>CLIENT'S NOTES:</b> Please provide details about your legal assistance needs <b>(APPT CANNOT BE MADE WITHOUT THIS INFO)</b>				