



CRIMINAL LAW INTAKE FORM

Full Legal Name: _____

Date of Birth: _____

Race/Nationality: _____

Social Security Number: _____

Address:

Length of Time at that Address: ____ years

Previous Address(es) (for last 10 years):

Home Telephone Number: _____

Work Telephone Number: _____

Facsimile Number: _____

E-mail Address: _____

Former Name(s): _____

Marital Status: _____

Previous Marriage(s): Yes__ No__ Ended By? _____

Children: Name/Date of Birth/Living at Home?



Education Information

High School Graduate? Yes__ No__

If Yes, School Name: _____

Year of Graduation/Last Grade Completed _____

College? _____ Yes__ No__

If Yes, School Name: _____ Major: _____

Year of Graduation: _____

Graduate School? Yes__ No__

If Yes, School Name: _____ Degree: _____

Year of Graduation _____

Additional Education History:

Employment Information

Position/Title: _____

Employer: _____

Employer's Address: _____

Length of Time with Employer: _____ years _____ months

Previous Employer(s) (for last 10 years): _____

Gross Monthly Income from Employment: \$ _____

Other Income: _____



Information About Arrest

Date of Arrest: _____

Time of Arrest: _____

Location of Arrest: _____

Date of Alleged Crime: _____

Location of Alleged Crime: _____

What was the reason or explanation given for your arrest?

Did the police have a warrant? Yes__No__

What crime were you charged with?

Who arrested you (name and badge number of officer(s))?

Was anyone else present at the time? Yes__No__

If Yes, explain:

Was your property searched at the time of the arrest? Yes__No__



If Yes, explain:

Did the police find anything that they kept? Yes__No__

Were you searched at the time of the arrest? Yes__No__

If Yes, explain:

Did the police find anything that they kept? Yes__No__

If Yes, explain:

Were you read your Miranda rights (informing you that you have the right to remain silent, you have the right to an attorney, etc.) at the time of your arrest? Yes__No__

If Yes, explain:

Did you give or sign any statements? Yes__No__

If Yes, explain:

If Yes, do you feel the statement was voluntarily given? Yes__No__

Explain: _____



Were you asked to participate in a line-up at any time? _____

Were you fingerprinted or photographed at any time? _____

At any time prior to or after your arrest did you speak to an attorney? Yes__ No__

What was the name of the attorney you spoke with? _____

At any time were you physically threatened or mentally harassed by the police?
Yes__ No__

If Yes, explain: _____

What is your version of the events leading up and causing your arrest?

Have you ever been questioned, but not arrested, in connection with a crime?
Yes__ No__

If Yes, explain: _____

Do you have a criminal record? Yes__ No__

If Yes, explain: _____



Do you have a drivers' license? Yes__ No__

If Yes, what state issued your license? _____

If No, have you ever had a drivers' license? _____

Explain:

Do you own any automobiles, motorcycles, or other motor vehicles? Yes__ No__

Have you ever owned a firearm? Yes__ No__

If Yes, explain: _____

Are you in good health? _____ Yes/No

Explain all current and chronic illnesses, past and future surgeries, and medications you are currently taking, and other relevant health information:

Do you have a history of alcohol or drug abuse? _____ Yes/No

If Yes, explain: _____

Have you ever been treated by a psychologist, psychiatrist or other mental health care professional? Yes__ No__

If Yes, explain:
