



RELATIVE IMMIGRATION CLIENT INTAKE FORM

Today's date: _____

Part A.

_____ Last Name (use complete name)	_____ First Name (use complete name)
_____ Other Names Used (if any)	Gender (circle one) M or F
_____ Write your name in your native alphabet, if in other than Roman letters	

_____ Address	_____ City	_____ State	_____ Zip code
_____ C/O (<i>in care of</i>)			

(____) _____ Telephone Number: Home	_____ E-Mail Address
(____) _____ Telephone Number: Cell	

_____	_____	\$ _____
Are you employed? (yes or no)	Current employer's name	Monthly Income
_____	_____	
Date you began	Address of Employer	

_____	(_____) _____
Emergency Contact	Their Telephone Number: Home
	(_____) _____
	Their Telephone Number: Cell

_____-_____-_____	A-_____
Social Security Number	Immigration "A" Number

_____	_____
USCIS ELIS Account Number	Current USCIS Status
_____/_____/_____	_____
USCIS Status Expiration Date	I-94 Number
_____	_____
Non-Immigrant Visa Number	Consulate Visa was Issued
_____/_____/_____	
Date Visa was Issued	

Language Spoken	_____	_____
	Spanish?	Other?

Date of ALL entries into the United States: Beginning with the most recent one	Port of entry	Did you enter with inspection?	
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

To better serve you, please describe why you are here today and what kind of assistance you need?

Please check off the boxes that apply to you:

<input type="checkbox"/>	Applying for a family member?
<input type="checkbox"/>	Is a family member applying for you?
<input type="checkbox"/>	Interested in obtaining citizenship of this country for yourself?
<input type="checkbox"/>	Renewing your work permit?
<input type="checkbox"/>	Renewing or replacing your <u>Legal Permanent Residence</u> card?
<input type="checkbox"/>	Other

Have you already consulted with another legal provider regarding your case?	Yes If your answer is 'yes', please answer who, when and where below:	No
Who:		
When:		
Where:		

Do you have any deadlines, such as:	Yes No Court dates _____
	Yes No Filing deadlines _____
	Yes No Other _____

Have you ever been arrested or incarcerated for any kind of offense? If your answer was “yes”, then please explain below when, where, for how long and why?	Yes No
When:	
Where:	
For how long?	
Why?	

Part B.

List every address where you have lived for the last five years:

Address	When did you begin living here? (mm/dd/yyyy)	When did you leave ? (mm/dd/yyyy)

List the last address outside the United States where you lived for more than one year:

Address	When did you begin living there? (mm/dd/yyyy)	When did you leave ? (mm/dd/yyyy)

<hr/> Last Date of Arrival

List every place where you have worked for the last five years:

Name and address of Company	When did you begin working there? (mm/dd/yyyy)	When did you stop working there? (mm/dd/yyyy)	Occupation

Name of his/her parents:	Father:
	Mother:

Family Information

Where do your parents live now?	Father:
	Mother:

Parent's date and place of birth:	Date of Birth:	Place of Birth:
Father		
Mother		

Current spouse's name:	
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Spouse Information (if applicable)

Date of Marriage:	
Place of Marriage:	

Spouse's Date of Birth:	Spouse's Place of Birth:
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Spouse's Mother	DOB:	Place of birth:	Current Residence:

Spouse's Father	DOB:	Place of birth:	Current Residence:
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List every address where your spouse have lived for the last five years:

Address	When did you begin living here? (mm/dd/yyyy)	When did you leave ? (mm/dd/yyyy)

List every place where your spouse have worked for the last five years:

Name and address of Company	When did you begin working there? (mm/dd/yyyy)	When did you stop working there? (mm/dd/yyyy)	Occupation

Ex-Spouse Information (if applicable)

Name of ex-spouse:	
DOB of ex-spouse:	

Date of Marriage:	
Place of Marriage:	
Date of divorce/termination:	
Place of divorce/termination:	

Ex-spouse's Date of Birth:	Ex-spouse's Place of Birth:

Names of your children	Date of Birth (mm/dd/yyyy)	Place of Birth (mm/dd/yyyy)

Have you sponsored or helped to sponsor someone else?	Yes No
	If you answer is "yes", please give the name and date of sponsorship (below):

Name of person sponsored:
Date of sponsorship:

Part C.

This part is only for naturalization applicants. If you are not applying for naturalization, please go to “Part D” to sign.

What is your spouse’s status? Please circle what applies:			
Legal Permanent Resident	U.S. Citizen	Without documents	Other

If your spouse is a U.S. citizen, did he or she obtain citizenship through a U.S. citizen spouse?	Yes	No
When did your spouse obtain the status?	Date:	
Where did you spouse obtain status?	City, State:	
Is your spouse or ex-spouse a <u>U.S. citizen</u> ?	Yes	No
Is your spouse or ex-spouse a Legal Permanent Resident?	Yes	No
If you answered “yes” to the above question, did you receive Legal Permanent Residency thru your spouse or ex-spouse?	Yes	No

Please list each and every trip you made outside of the USA since becoming a permanent resident:

When did you leave?	When did you return?	Where did you go?	How many days were you outside of the U.S.?

	_____ Date of Marriage Ended: _____
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*If relative is petitioning for more than one person, please complete this information for each applicant.

Part E. How did you learn about us? Friend Walk-in Other

Have you utilized other services at our firm? Yes No

If yes, please list: _____

I authorize the attorneys at CHILLICO & ASSOCIATES, LLC along with their staff and consultants, to assist me in completing this form so that they may determine whether or not they will accept my case.

Client Signature

Date