

Appendix A: Intake Form

INTAKE

Date: _____ Court Case Number: _____

Are you court referred? Yes No Returning Court date: _____

Referred by: _____ Advanced Payment Discussed Yes No

Parent Name: _____

Address: _____

City State Zip

Phone: _____

Gender: Male Female Age: _____

The ethnic group with whom I most identify: African-American Asian Caucasian

Hispanic/Latino Native American Bi-racial Other Decline to state

The approximate annual income of my household is:

Less than \$10,000 \$10,000-\$19,999 \$20,000-\$24,999 \$25,000-\$29,999 \$30,000-\$39,999
\$40,000-\$49,999 \$50,000-\$59,999 \$60,000 and above

The other parent and I were married: Yes No Date (month/year): _____/_____

If **no**, then the other parent and I lived together: Yes No Date (month/year): _____/_____

If **no**, when did your relationship with the other parent begin? Date
(month/year): _____/_____

Date of Separation/Divorce (month/year): ____/____

Other Parent

Name: _____ Age: _____ Phone #: (____) _____ -

Ethnicity: African-American Asian Caucasian Hispanic/Latino

Native American Bi-racial Other Decline to state

Children

Names, Ages, and Gender:

1) _____ Age: _____ Male Female

2) _____ Age: _____ Male Female

3) _____ Age: _____ Male Female

4) _____ Age: _____ Male Female

5) _____ Age: _____ Male Female

6) _____ Age: _____ Male Female

Alternative Contact Numbers

Cell: _____ Pager: _____

Family Member: _____ Phone number: _____

Friend: _____ Phone number: _____

-----Office Use Only-----

Fee policy explained & client advised cash pay only on 1st and 3rd sessions. Yes No

Client informed that **no** children are allowed at the class. Yes No

Client informed they are **not to attend the same class** as the other parent. Yes No

Client informed if they miss the **first session**, must re-register for next class. Yes No

Group **Location**: _____ **Date**: _____

Screening call to client within one week. Yes No

Call by _____

Case ID # _____