**Personal Information**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_ Gender: M or F

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip

Home Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_ Cell Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OK to leave message on Cell Phone? \_\_\_\_ Yes \_\_\_\_ No Ok to text message cell phone? \_\_\_\_ Yes \_\_\_\_ No

OK to contact by email? \_\_\_\_ Yes \_\_\_\_ No

OK to leave message on Home Phone? \_\_\_\_ Yes \_\_\_\_ No

Occupation \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referred by/How did you hear about us?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Marital/Family Information**

**Marital Status** (check all that apply)

\_\_\_ Single

\_\_\_Legally married: if yes length of time \_\_\_\_\_\_

\_\_\_Unmarried, living together: if yes length of time \_\_\_\_\_\_

\_\_\_ Annulment: if yes length of time \_\_\_\_\_\_

\_\_\_ Widowed: if yes length of time \_\_\_\_\_\_

\_\_\_ Separated: if yes length of time \_\_\_\_\_\_

\_\_\_ Divorce in process: if yes length of time \_\_\_\_\_\_

\_\_\_ Divorced: if yes length of time \_\_\_\_\_\_

Total number of marriages \_\_\_\_\_\_

Assessment of current relationship (if applicable): Good \_\_\_\_ Fair \_\_\_\_ Poor \_\_\_\_

Name of Spouse \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_\_ Gender: M or F

Spouse’s Home Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_ Spouse’s Cell Phone \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_

Spouse’s Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OK to leave message on Cell Phone? \_\_\_\_ Yes \_\_\_\_ No Ok to text message cell phone? \_\_\_\_ Yes \_\_\_\_ No

OK to contact by email? \_\_\_\_ Yes \_\_\_\_ No

OK to leave message on Home Phone? \_\_\_\_ Yes \_\_\_\_ No

Children’s Information:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| From Previous Marriage? (yes/no) | Name | Date of Birth | Age | Gender | Living (yes/no) | Marital Status |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Financial Information**

Name of Responsible Party \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Relationship to Client \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone \_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_ Home phone \_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_

Employer’s address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip