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Date: \_\_\_\_\_

**CRIMINAL INTAKE FORM**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

SSN: \_\_\_\_\_ Sex:  Male  Female DLN: \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Years at Present Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Alternative Phone Number/Contact Method: \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Separated Race: \_\_\_\_\_

Education Level: \_\_\_\_\_ Professional Licenses: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Years Married: \_\_\_\_\_ Date of Arrest: \_\_\_\_\_

**Children Names and Ages:**

Child 1: \_\_\_\_\_ Age: \_\_\_\_\_

Child 2: \_\_\_\_\_ Age: \_\_\_\_\_

Child 3: \_\_\_\_\_ Age: \_\_\_\_\_

Child 4: \_\_\_\_\_ Age: \_\_\_\_\_

Child 5: \_\_\_\_\_ Age: \_\_\_\_\_

Number of Years in County of Residence: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Cause Number: \_\_\_\_\_

Crimes Charged: \_\_\_\_\_

Number of Days in Jail: \_\_\_\_\_ Mirandized:  Yes  No Recorded:  Yes  No

Police Agency that arrested you: \_\_\_\_\_

Name of Police Officer: \_\_\_\_\_

Was there a search performed: \_\_\_\_\_

If so, were you given any warnings: \_\_\_\_\_

If family members contact me, do I have permission to speak to them:  Yes  No

Present Occupation: \_\_\_\_\_ How long employed there: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_ Military Service:  Yes  No

Previous Employment: \_\_\_\_\_

Physical/Mental Disorders: \_\_\_\_\_

Medications: \_\_\_\_\_ Name of Physician: \_\_\_\_\_

Are you currently on probation:  Yes  No

How were you referred to our office ?:

Google  Bing  Facebook  AVVO  FindLaw  Newspaper  Radio

Friend/Family: \_\_\_\_\_  Lawyer: \_\_\_\_\_

Other: \_\_\_\_\_

Attorney Notes:

Fee: \_\_\_\_\_ Trial Fee: \_\_\_\_\_