

INITIAL INTAKE FORM

NAME OF CLIENT:

BASIC INFO

- Intake by:
- Date and time of call:
- Client's address:
- Client's phone number:
- Client's income:
 - Total # of dependents:
- Language:
- Referred to EJC by:
 - Did you get a justice card?

EMPLOYER

- Full name(s):
- Company(ies), if any:
- Supervisor(s):
- Address:
- Phone number:
- Number of Employees:

BASIC FACTS

- Amount owed:
- Summary of facts (include description of work):
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- Reason given by employer for not paying:
- When did you last speak with employer about unpaid wages?
- What did they say? How many other workers have similar claims?
 - How many can you currently contact?

DATES, HOURS, PAY

- Dates of Employment (Start Date; Termination Date):
- Dates worked for which unpaid:
- Usually, how many hours per day?
- Usually, how many days per week?
- Was agreement verbal or written?
- How much were you promised (per hour, day, week, piece rate, etc.)?
- Usually paid in cash or check?

MECHANIC'S LIEN QUESTIONS

(if not construction, demolition, or remodeling work)

- For the period of time you worked without being paid, at how many locations did you work?
- Address(es) of construction site(s):
 - (If addresses unknown)
 - In what cities/counties were the worksite(s)?
 - Can you get the address(es)?
- Was the construction site a residence?
 - If yes, does the owner live at that residence?
- When did the work begin for which you were not paid?
- When did the last work occur for which you were not paid?
- If no longer working there, why did you stop working?
- Chain of contractors (who contracted whom) from owner down to you, including any people who worked for you:
 - General/Original Contractor:
 - Subcontractors:
- When was the entire project (not just your part) finished, or when is it supposed to be finished?