



STUDENT LEGAL SERVICES

Legal Intake Form

Date: _____

Name: _____

NUID: _____

Demographics

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Gender: _____ Year in School: _____

Ethnicity: _____ Citizenship Status: _____

College: _____ Major: _____

Contact Information

Phone Number: _____ Email: _____

Who Referred You to Student Legal Services: _____

Legal Issue

Finance Immigration Name Change Probate

Housing Family Power of Attorney Notary

Criminal Protection Order Last Will and Testament Other

If Other selected, please explain other Legal Assistance you need

All information disclosed on this form is confidential and will not be revealed to anyone without your express permission, except where disclosure is required by law. This office does not discriminate based on race, color, ethnicity, national origin, sex, pregnancy, sexual orientation, gender identity, religion, disability, age, genetic information, veteran status, marital status, or political affiliation.