



THE SAROYAN LAW FIRM, L.L.C.

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Criminal Intake Form

- CONFIDENTIAL -

Full Name: \_\_\_\_\_ Today's date: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Any limitations on contacting you (Email not secure? Cell phone not secure, etc.)? \_\_\_\_\_

Occupation: \_\_\_\_\_ For how long?: \_\_\_\_\_

Employer name & address: \_\_\_\_\_

Do you hold any professional licenses (i.e., medical, Class A driving, teaching, etc.)? \_\_\_\_\_

Do you have a security clearance? \_\_\_\_\_

DOB \_\_\_\_\_ Driver's State/License# \_\_\_\_\_ Social Security # \_\_\_\_\_

Educational background: \_\_\_\_\_ Serve in the Armed Forces?: \_\_\_\_\_

Married? \_\_\_\_\_ If you have children, how many? \_\_\_\_\_ Whom do they live with? \_\_\_\_\_

What, if any, medications do you take? \_\_\_\_\_

Have you ever received mental health or substance abuse counseling? \_\_\_\_\_

Are you a U.S. citizen? Y/N If not, what is your immigration status? \_\_\_\_\_

(Note: It is important to provide your correct immigration status because some criminal convictions could affect that status. **All information provided, including immigration status, remains confidential.**)

SIGNIFICANT OTHER'S INFORMATION

Name \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Living at same address? \_\_\_\_\_ How long known \_\_\_\_\_ Phone \_\_\_\_\_

ARREST/TICKET INFORMATION

City and County of Arrest or Ticket \_\_\_\_\_

Booking #\_Date of arrest/ticket and charge (include Code section, if known) \_\_\_\_\_

Date & location of alleged crime/infraction \_\_\_\_\_

Court Name, Court Date, and \_\_\_\_\_

Arresting Officer's Name & badge number (if available) \_\_\_\_\_

Was anyone else arrested? \_\_\_\_\_ If so, name(s) of all persons arrested \_\_\_\_\_

What statements did you make to lawenforcement? \_\_\_\_\_

Have you discussed the crime with anyone else? \_\_\_\_\_ Describe the order of events leading up to the arrest \_\_\_\_\_

List any witnesses to the alleged crime if known \_\_\_\_\_

List any alibi witnesses \_\_\_\_\_

What is the amount of bond you posted, if any? \_\_\_\_\_ List any special bond conditions \_\_\_\_\_

List prior arrests/charges/tickets, date, and the final outcome (including any DUIs in Colorado or another state):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Are you currently on probation or parole?\_\_\_\_\_If so, for what offense?\_\_\_\_\_

Name of parole or probation officer\_\_\_\_\_Office location\_\_\_\_\_

COMMENTS THAT MAY BE OF VALUE TO YOUR CASE:

Multiple horizontal lines for writing comments.