

## ERMA'S HOUSE INTAKE INFORMATION

Please fill in the following information and **return it to Erma's House**. At the time of the intake bring along copies of any Court Orders, Orders of Protection, Police Reports and Parenting Time/ Visitation Orders.

**DATE:** \_\_\_\_\_

**REFERRED BY:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ RESIDENTIAL OR NON-RESIDENTIAL PARTY  
(Circle one)

**CURRENT ADDRESS:** \_\_\_\_\_  
Street City Zip

**HOME PHONE NUMBER:** \_\_\_\_\_ **PAGER/CELLULAR NUMBER:** \_\_\_\_\_

Best number/time to contact you? \_\_\_\_\_

May we leave a message? \_\_\_\_\_

**DOB:** \_\_\_\_\_ **RACE OR ETHNIC GROUP:** \_\_\_\_\_

**EDUCATION COMPLETED:** \_\_\_\_\_ **MARITAL STATUS:** \_\_\_\_\_

**EMPLOYMENT:** \_\_\_\_\_ **What do you do at work?** \_\_\_\_\_

**Hours worked per week:** \_\_\_\_\_ **Work Phone Number:** \_\_\_\_\_

**May we call at work?** \_\_\_\_\_

**CURRENT MONTHLY INCOME** \_\_\_\_\_ **NUMBER OF PEOPLE IN HOUSEHOLD** \_\_\_\_\_

**MODEL OF CAR:** \_\_\_\_\_ **LICENSE PLATE NUMBER:** \_\_\_\_\_

**CHILDREN INVOLVED :** \_\_\_\_\_

	First	Last	DOB
_____	First	Last	DOB
_____	First	Last	DOB
_____	First	Last	DOB

PLEASE DESCRIBE YOUR CURRENT PARENTING TIME/VISITATION ARRANGEMENTS?

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



**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

**NEXT HEARING DATE:** \_\_\_\_\_

**Court, Judge or Magistrate:** \_\_\_\_\_

**YOUR ATTORNEY**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**FAX :** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

Is there a GAL (Guardian Ad Litem) or CASA involved with your case? If so please provide the following information.

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **E-Mail** \_\_\_\_\_