

**SHEILS WINNUBST SANFORD & BETHUNE
INTAKE QUESTIONNAIRE**

The information you provide will be maintained as CONFIDENTIAL.

PLEASE PRINT OR TYPE.

Date: _____

Name: _____

Address: _____

Telephone(s): _____

Employer or company with whom you have a legal problem:

Number of employees at the company: (a) locally _____ & (b) nationally _____

How long were you (or have you been) employed by this company? _____

Have you been:

1. Terminated? ____ Date Notified _____ Date of Termination _____

2. Demoted? _____

3. Denied Promotion? _____

4. Refused a job you applied for? _____

5. Other? _____

What was the reason given by the employer?

Briefly describe your main complaint:

What is your age? _____

What was your salary, total yearly compensation and benefits?

What was your job title (or what job were you seeking)? _____

Have you signed a release or waiver? _____

Have you found other employment?

1. Yes (if so, new salary) _____
2. No but expect to soon _____
3. No and do not expect to soon _____

Do you believe your case may involve any of the following (yes, no or maybe)?

Age discrimination: _____

Gender discrimination: _____

Sexual harassment: _____

If so, sex, age and job title of everyone
who sexually harassed you: _____

Does the sexual harassment include unwelcome touching? _____

Disability discrimination: _____

If so, what is your disability? _____

Did the company know you had a disability? _____

Race discrimination: _____

Libel or slander: _____

Breach of contract: _____

Fired for refusing to perform an illegal act: _____

If so, what did you refuse to do: _____

Fired for filing a workers= compensation claim: _____

Another company interfered to get you fired: _____

Other (please specify): _____

Who referred you to this law firm? _____

Are you aware of any kind of deadline with respect to your need for legal advice or representation? If so, please explain briefly:

Signature: _____

Date: _____