

# FAMILY INTAKE

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Referred by: \_\_\_\_\_ Today's Date: \_\_\_\_\_

## **I. Client Information**

**CLIENT Name:** \_\_\_\_\_

First

Middle

Last

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_

How many years lived in PA: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Maiden name \_\_\_\_\_

Present Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Salary: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

## **II. Spouse's Information**

**SPOUSE'S Name:** \_\_\_\_\_

First

Middle

Last

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_

How many years lived in PA: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Maiden name \_\_\_\_\_

Present Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Salary: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

### **III. Marital Information**

Date and place of marriage \_\_\_\_\_  
Date City County State

Number of this marriage (Client)  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

Number of this marriage (Spouse)  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

Date of separation \_\_\_\_\_ Do you have a copy of marriage certificate \_\_\_\_\_

### **IV. Child/ren Information**

Do you & your spouse have any children together \_\_\_\_\_ How many \_\_\_\_\_  
If so, please state the following:

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

THE THOMAS SMITH FIRM, P.C.  
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\*MEMBER OF PA AND NJ BAR

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In the past five years, where, when, and with whom have the above listed children lived:

Address:	With Whom They Are Living:	Dates:
_____		
_____		
_____		

Do you have child/ren from a prior marriage or with any other person. If so, please state:

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Does your spouse have child/ren from a prior marriage or with any other person. If so, please state:

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**V. Additional Information**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_