

## **EMPLOYMENT INTAKE FORM**

NAME:			MIDDLE				LAST	
ADDRESS:								
STREET   EMAIL ADDRESS:   PHONE (HOME):   PHONE (CELL):   PHONE (WORK):					STATE OF BIRTI			
$\bigcirc \bigcirc \bigcirc \bigcirc$	DISCRIMINAT HARASSMEN RETALLIATIOI WHISTLEBLO	T N	e Gender R	lace	Other	_		
$\bigcirc$	REFERRED BY REFERRED BY YOU ARE A FO WEBSITE / IN EVENT	SON EASTMAN N AN ATTORNEY FORMER CLIENT ORMER CLIENT TERNET/ SOCIAL	<sup>-</sup> / FRIEND MEDIA	Name: Name:				
ADDRESS OF EMPLOYER: POSITION WITH EMPLOYER:								
NAME OF SUPERVISOR / MANAGER:								
HOW MANY YEARS / MONTHS AT JOB:								
DATE OF DISCHARGE:								
REASON GIVEN BY EMPLOYER FOR DISCHARGE:								
DID YOU HAVE A WRITTEN CONTRACT:								
WAS THERE AN EMPLOYEE MANUAL:								
DID YOU RECEIVE ANY WARNING(S) PRIOR TO DISCHARGE:								
WAS THERE A UNION MEMBERSHIP:								
IF THERE WAS, HAVE YOU OR THE UNION FILED A GRIEVANCE:								
HOW LONG OUT OF WORK:								
	BRIEF DESCRIPTION:							

**\*\*** If you answered "YES" to any of the questions above and have the related paperwork, please bring those documents and any other relevant materials with you to your appointment. **\*\***