

## Service Member Immigration Intake

**\*NOTE: The Immigrations Paralegal cannot assist you if any of the following are true:  
If you (or spouse) have other pending separation or divorce legal cases with our office / If  
you or your wife have only attended the separation & divorce brief / If you are currently  
have an immigration attorney representing you for any immigration matter.**

**PLEASE PRINT LEGIBLY**

1. Rank: \_\_\_\_\_ Branch of Service \_\_\_\_\_ Today's Date \_\_\_\_\_  
(month/day/year)

**Notices and Disclaimers**

**PRIVACY ACT STATEMENT:** AUTHORITY 5 USC 301, Departmental Regulations: 10 USC 1044; and 32 CFR Part 727, Legal Assistance. **SYSTEM OF RECORDS NOTICE: N05801-2. ROUTINE USE(S)** Information provided is used to provide an administrative record for use by attorneys and clerical personnel directly involved in providing legal assistance, to manage internal counsel assignment, and for internal management of the office to include periodic workload productivity and statistical reports.

**MANDATORY /VOLUNTARY DISCLOSURE CONSEQUENCES OF REFUSAL TO DISCLOSE:** Disclosure of requested information is voluntary, but failure to provide such information may limit the Legal Assistance Office's ability to provide assistance.

**DISCLAIMER:** Completing this form alone does not create a client relationship. To form a client relationship, you must meet with an immigration paralegal. The paralegal will use this form to screen your eligibility and immigration matter to become a client of this office for immigration services. If qualified, the paralegal will assist you with the proper process, immigration forms, filing fees and supporting documents. If paralegal cannot assist you, then you may be referred to external immigration counsel. If you or your family member currently have outside counsel for the immigration issue you are here for, then the paralegal cannot assist you.

**I have read and understand the above notices and disclaimer. I affirm that the information below is true and complete to the best of my knowledge and belief**

**\*Your signature** \_\_\_\_\_ **Date:** \_\_\_\_\_ (mm/dd/yyyy)

2. EDIPI \_\_\_\_\_
3. Name (Last(s), First, Middle): \_\_\_\_\_
4. Complete Address(s): (your physical (barracks or home) and mailing) \_\_\_\_\_  
\_\_\_\_\_
5. Email Address(s): \_\_\_\_\_
6. Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_
7. Date of Birth: \_\_\_\_\_ (month/day/year) Country of Birth: \_\_\_\_\_
8. Marital Status – \_\_\_\_\_ Date and Place of Marriage \_\_\_\_\_
9. Spouse's Complete Name: \_\_\_\_\_
10. Any prior marriages for you \_\_\_\_\_ Any Prior marriages for your spouse \_\_\_\_\_
11. Previous Spouse - Complete Name? \_\_\_\_\_
12. Children in current marriages? \_\_\_\_\_ Children from prior marriage? \_\_\_\_\_

