Intake Form

For Regulatory, Legal, or Administrative Review

1. Contact Information

Your Name: _____

Contact Number: _____

Best Time to Return Your Call:

- Morning
- Afternoon
- Evening
- Anytime (Or specify: _____)

2. Relationship Information

Your Relationship to the Resident: _____

Your Relationship to the Facility (if any): (e.g., family member, responsible party, staff, advocate, visitor)

3. Facility Information

Facility Name: _____

Facility Address (optional):_____

Facility License Number: _____

4. Attorney Information (If Applicable)

Attorney Name: _____

Law Firm: _____

Attorney Contact Number: _____

Attorney Email: _____

Type of Case:

- o Plaintiff
- o Respondent

5. Request for Service Needed

Please indicate the type of assistance you are seeking: (Check all that apply or describe below)

- ☐ Regulatory review
- ☐ Facility compliance assessment
- ☐ Resident care concern review
- ☐ Documentation review
- ☐ Advocacy or mediation
- ☐ Expert witness evaluation
- ☐ Licensing or Title 22 consultation
- ☐ Staff training or corrective action planning
- ☐ Legal coordination or case support
- ☐ Other (describe): _____

Additional details about the service requested:

_____

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6. Summary of Concern

Please provide a brief description of the concern: (Include dates, times, individuals involved, and any immediate safety issues if known.)

7. Additional Notes (Optional)

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Acknowledgment

By submitting this form, you acknowledge the following:

- This intake form is used solely for the purposes of initial contact, verifying review of the FAQ, confirming acceptance of the Terms and Conditions, and documenting internal notes necessary to determine whether the matter is appropriate for expert-witness services.
- Submission of this form does not create an expert-witness relationship or guarantee availability.
- Confidential or sensitive records should not be submitted until formally requested following conflict-of-interest clearance, security measures, and execution of a service agreement.
- By proceeding to purchase any service, you affirm that you have reviewed the FAQ and accepted the Terms and Conditions in full.

Print Name: _____

Law Firm: _____

Signature: _____