BAILEY & GALYEN
Attorneys at Law

SOCIAL SECURITY INTAKE SHEET

Name _____ DOB: _____ Sex: M ____ F ____
     Last Name   First   Middle   Maiden

Place of birth_____
            City   County   State   Country

Social Security Number: _____ Drivers License Number: _____ State_____

Address: _____Apt. #_____

City: _____ County: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

E-Mail Address: _____Cell Phone: (_____) _____
☐ I authorize emails concerning my case.   ☐ I authorize emails of general interest from Bailey & Galyen.
☐ I authorize a follow up call regarding my consultation. If yes, please list a contact number. (_____)_____

Marital Status: _____ Spouse's Name: _____

What date did you apply for disability benefits? _____What date did you become disabled?_____

What date did you last work? _____ What was your job? _____

What dates were you denied benefits? (Enter all dates if multiple applications or multiple denials on same application)

_____

Do you know what level of appeal your case is on? _____

Did you apply for both DIB and SSI or only one? _____

Highest grade completed in school? _____ any vocational training? _____

What type of work have you done for the last 15 years? _____

Did you receive any worker's compensation benefits associated with your disability? _____

How much per month and what dates? _____

What are your impairments or your diagnosis? _____

Which doctors have treated you and are treating you for your disability?

Have you or family member been involved in any type of accident in the last two years?   Yes_____   No_____

Have you or a family member ever suffered any serious injuries after taking a prescription or non-prescription drug? Yes_____ No _____

Do you have need of legal assistance for any immigration matter? Yes_____ No _____

Purpose of visit today: _____ Do you currently have a will? Yes _____ No _____

HOW WERE YOU REFERRED TO US? (Circle one)   Office Sign   I'm a Previous Client   Bar Association   B&G Letter   TV Ad   Radio

Billboard   Website   In Mesquite   Phonebook: name of book _____ Friend: Name of Friend_____

An Attorney: Name of attorney _____ Other: _____

Bailey & Galyen Employee: Name of Employee _____