## **RIAC LEGAL ASSISTANCE INTAKE FORM:**

## **CRIMINAL CASE**

PLEASE SUBMIT THIS FORM ALONG WITH THE REQUESTED SUPPORTING DOCUMENTATION by email to RIAC2@ocbaacp.org

DATE OF REQUEST:						
<u>ATTORNEY INFORMATION:</u> Attorney Name:						
CONTACT numbers: (office/cell) Email address:						
$\textbf{AFFILIATION:} \ \square \ \textbf{Public Defender} \ \square \ \textbf{Assigned Counsel} \ \square \ \textbf{Lega}$	l Aid ☐ Conflict Defender ☐ ProBono ☐ Other:					
$\textbf{COUNTY:} \ \square \ \textbf{Broome} \ \square \ \textbf{Chemung} \ \square \ \textbf{Chenango} \ \square \ \textbf{Cortland} \ \square$	Delaware ☐ Herkimer ☐Jefferson ☐ Lewis					
☐ Madison ☐ Oneida ☐ Onondaga ☐ Oswego ☐ Otsego ☐ So	:huyler ☐ Tioga ☐ Tompkins ☐ Other/Conflict:					
NATURE OF THE CASE: ☐ CRIMINAL ☐ APPEAL	□ OTHER:					
<u>CLIENT INFORMATION:</u> Client Name:	DOB:Age:					
Date of Admission/Entry into US:	_Client's Alien # (9-digits):					
☐ FEMALE ☐ MALE ☐ NON-BINARY Class of Adn	nission into US (e.g. RE8, IR6, B-1/2, F-1):					
Country of Birth:	Primary Language of Client:					
Interpreter Used: ☐ YES ☐ NO Name of Agency use	ed/contact #?					
In Custody? ☐ YES Where? ☐ local/state custody? [						
<b>CURRENT</b> Immigration Status: ☐ LPR/Green Card	☐ Refugee ☐ Asylee ☐ Immigrant Visa					
☐ Non-Immigrant Visa (Visitor/Student/ Worker)						
☐ DACA ☐ ICE Order of Supervision ☐ Undocum						
E DACA E TOE OTHER OF Supervision E office current	——————————————————————————————————————					
ORIGINAL Entry into United States:   Immigrant	(Permanent Resident) Visa ☐ Refugee					
☐ Cuban paroled into US ☐ Non-Immigrant Visa (	Student/ Worker)					
☐ Undocumented (Entered without inspection)	, ,					
**PLEASE SUBMIT COPY OF CLIENT'S IMMIGR Please list all family member NAMES in the United St they have been in the U.S.						
Any Pending/Prior Removal Proceedings? ☐ YES If y	es, next/last court date:   NO					
If prior removal proceeding, explain charges (ground						
Name of Attorney or Organization that Represented	during Immigration Court:					
Does Your Client have an Immigration Attorney (curr	ent or previously)?   YES   NO					

If YES, Name and contact phone or email:
Has your client ever been in <u>any</u> type of trouble with immigration (arrested by ICE, put into removal proceedings, or denied entry to the United States)?   ———————————————————————————————————
Does your client have any pending applications with USCIS or planning to file any applications in the near future? $\Box$ YES, please specify: $\Box$ NO
Has your client in the past ever applied for <u>any</u> type of immigration benefit? (for example, a work permit, asylum, a green card)? ☐ YES (when, where, approved, denied and if so, why)
Has your client ever been arrested or convicted ANYWHERE of any offense relating to marijuana or cannabis, including using drug paraphernalia relating to marijuana or cannabis?   YES  NO  If YES, please provide date(s) and disposition(s):
Has your client ever admitted using marijuana or cannabis to a government official (e.g., probation officer, parole officer, CPS worker, social worker, USCIS, ICE or CBP officer or on an application of any kind)? ☐ YES If yes, please explain below: ☐ NO
Has your client ever had any arrests or convictions related to marijuana or cannabis vacated and/or expunged? ☐ YES If yes, please explain below: ☐ NO
Is the complainant in a "domestic" relationship to your client? (spouse, partner, household mem., Boyfr., girlfr., child, parent, etc.)   YES (if yes, what is the relationship?)   NO
Was there a child involved in the incident in any way? $\ \square$ YES $\ \square$ NO
Is there an Order of Protection in effect against your client? $\Box$ YES (Please provide a copy) $\Box$ NO
Is there any evidence your client has a substance abuse disorder? $\square$ YES $\square$ NO
Does client have any mental health issues? ☐ YES ☐ NO
Any alleged gang affiliation? ☐ YES ☐ NO

## Court where case is pending:\_\_\_\_\_\_ Next court date:\_\_\_\_\_\_ Stage of Proceedings at time of this Request: | Arraignment | Pretrial | Report on Offer | Post Indictment | Hearing(s) Calendar | Preparing for Trial | Pre-Sentence | Post Plea/Trial • Charges (Please provide specific subdivision of each charge): \*\*PLEASE SUBMIT COPY OF CHARGES & SUPPORTING DOCUMENTS\*\* Any Co-defendants? | YES: names: | NO Is there an Offer? | YES: list with specific subdivisions and proposed sentence: | NO

\*\*PLEASE SUBMIT COPY OF WRITTEN PLEA OFFER, IF ANY\*\*

Any Prior Convictions <u>or</u> Arrests (including out of state convictions)? ☐ YES: ☐ NO
 \*\*PLEASE SUBMIT A COMPLETE COPY OF CRIMINAL HISTORY \*\*

(REV 06/2023)