

**Client Intake Form - Law Offices of Shawn L. Birken, P.A.**  
**100 SE 3rd Ave, Suite 1300 Fort Lauderdale, FL 33394**

Thank you for contacting our firm regarding your legal inquiry. Please provide us with the following information so that we have a broader picture of the circumstances surrounding your potential claim:

1. Your full name:
2. Phone Number/email:
3. What is the name of your employer?

(we need this information for conflicts purposes/the information you provide is confidential)

4. How many employees are there?
5. Date of hire?
6. What is your title/position/duties?
7. How long have you worked there?
8. Where you terminated? What was the reason given by employer for the termination?
9. Date that discrimination occurred?
10. Date terminated (if applicable)?
11. Does the company have an employee manual?
12. Did you complain to your Supervisor/HR department?
13. What happened after complaint?
14. What was/is your rate of pay and HOW were you paid (cash/check/payroll company, etc.)?
15. Were you hourly/did they work overtime and were you paid for your overtime?
16. Are you owed any money right now?