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| **Method of initial communication:** Telephone / email / post/other (specify) | | **Date of initial contact:** |
| **Date client contacted:** |
| **Client name:**  *(including title; e.g. Mr/Ms)*  **Client’s postal address:** | **Email address:**  *(Is the client willing to be contacted in this way?* ***YES / NO****)*  **Telephone number(s):**  *(Is the client willing to be contacted in this way?* ***YES / NO****)* | | |
| **Has the client already instructed a solicitor?: YES / NO**  *(please delete as appropriate)* | | | |
| **Is there a pending deadline?: YES / NO**  *If so, when?* | | | |
| **Are we aware of any opponent in the case? YES/NO If yes, who?** | | | |
| **Has a check of the past cases database been checked for any previous record?: YES / NO**  *(this should be done for the client, and where applicable the opponent)*  **Are we aware of any other conflict of interest issues at this stage?: YES / NO**  *(please delete as appropriate)* | | | |
| **How did the client find out about XX Law Clinic?** | | | |
| **Nature of the client’s problem:** | | | |
| **Is the case suitable for the Clinic: YES / NO**  **In cases of unsuitability, the reasons are :**  **Was client referred elsewhere? YES / NO If so, where?** | | | |
| **Appointment made for:**  *(please note the time and date)* | | | |