



Intake of First Name LAST NAME

Intake conducted by/date:

Name:	Actual caregivers' names, relation to child, and immigration status:
A#:	ORR Sponsor's name, relation to child, and immigration status:
DOB:	Biological mother's name, location, and immigration status:
Address:	Biological father's name, location, and immigration status:
County:	Contact:
Age:	Date Child Turns 18:
Country of Origin:	Date of Entry and twelve month anniversary:
Language:	Date of Release and six month anniversary:
Potentially Adverse Parties: Immigration and Customs Enforcement	Next Hearing:

This memo is based on information provided to KIND at the child's intake. You may find that the information you receive from the client is different from the information below. Please do not use this intake memo as the sole source of factual information for your case.

Summary of Case:

Life in Home Country:

Trip to US:

Current Living Situation:

Other Important Information: *(Such as confidential info, issues with school enrollment, plans to move, in absentia removal orders, medical conditions, issues at home with living situation, need for follow up services, etc)*

RECOMMENDATIONS FOR RELIEF*

SPECIAL IMMIGRANT JUVENILE STATUS

Abuse, Neglect, or Abandonment:

Placed in Custody of/Dependence on Juvenile Court:

Best Interest of Child to Not be Returned to Home Country:

Relevant Deadlines:

Other issues/Legal hurdles:

ASYLUM

Past Persecution:

Fear of Future Persecution:

On Account of: *(name possible PSG if applicable)*

Government Action or Inaction:

Relevant Deadlines: *(1 year filing deadline for asylum, date of reunification)*

Other Issues:

U VISA

Crime [including date, jurisdiction and outcome]:

Police Cooperation:

Substantial Harm:

Other Issues:

T VISA

Severe Trafficking:

Law Enforcement Cooperation:

Possible Hardship if Removed:

Other Issues:

*At time of intake.