



New Client Intake Form

In part, our fees are based on the amount of time we spend gathering the information we need to provide you with sound legal advice. We prepared this form to assist you to minimize the legal fees we will charge you and to maximize the amount of time we spend providing you with legal advice during our initial interview. If you complete this document as completely as possible in advance of an initial interview, we do not have to charge you for the amount of time it takes us to gather the information we require to provide legal advice. The information contained on this form is subject to solicitor-client privilege because the predominant purposes for which it is sought and provided are for seeking and obtaining legal advice.

Please print or write legibly when completing this form. After you have completed this form send it to us by either email or fax, before contacting us to schedule an initial interview. Thank you.

*Labour Rights Law

*Sebastien Anderson Prof. Law Corp.

1. Employee Personal Information		
Full Legal Name:		
Address:		
Home Telephone No.:	Cellular Telephone No.:	
Business Telephone No.	Personal Email Address:	
Facsimile No.:		
DOB:	Age:	
SIN:	Drivers license or other government issued photo ID:	
Marital Status:	Partner's Full Legal Name:	
<u>Name of Dependents</u>	<u>Sex</u>	<u>DOB and Age</u>



2. Employer Information

Employer's Full Legal Name:

Doing Business As:

Address:

Corporate Name and Address (if different from above)

Business Telephone:

Facsimile No.

Email:

Website:

Name of Immediate Supervisor/Manager:

Sale of Business/Change of Ownership:



3. Union or Employees' Association Information (if applicable)

Name of Trade Union/Employees' Association:	Local No.:
Union/Association Address:	Union/Association Phone No.
Name of Union/Association Representative:	Union/Association Rep. Ph. No.:
Have you exhausted the internal remedies available through the Union/Association, e.g., grievance procedure/internal appeal procedures? If not, why?	

4. Employment History

Written Employment Contract (If you have a written employment contract, please bring it with you to the initial interview)	
Initial Date of Hire:	Subsequent Date of Hire:
Initial Classification:	Initial Job Title:
No. of Years & Months Continuous Employment:	Total No. of Years & Months Employment (including non-continuous)



4. Employment History

Inducement Factors: Were any promises made to you to get you to accept the Employer's job offer? If so, who said what, and when?

Details of Promotions & Transfers:

Current Classification:

Job Description:



4. Employment History

Principal Responsibilities/Supervisory Responsibilities:

Probationary period, if any:

Date of Termination or Anticipated Date of Termination:

Termination Circumstances:



4. Employment History

Did you say anything to the Employer, your supervisor or a co-worker about quitting or resigning? If so, explain.

When you were informed about the termination of your employment treated with respect and in an honest and courteous manner? If not, explain



4. Employment History

Other claims that you think you may have (e.g., defamation, discrimination, mental distress, non-payment of overtime, etc.)

Other perceived wrongs?

Supporting Documents:

Date	Description

5. Salary and Benefits:

Monthly Salary:

Annual Salary:



5. Salary and Benefits:

Commissions/Commission Structure:

Bonus:

Pension/R.R.S.P. contributions:

Allowances (e.g., Car Allowances/Lease Vehicle, etc.)

Annual Bonus:

Performance Bonus:

Annual Vacation Entitlement:

Medical (MSP-Single or Family; Employer paid or % of Employee and Employer contributions; & Extended Medical Benefits):

Dental (%Major/Restorative/Orthodontic):



5. Salary and Benefits:

Insurance Benefits (LTD, STD, AD&D, Group Life):

Other Benefits (e.g., automobile allowance, stock options, profit sharing plans, etc):

Supporting Documents:

<u>Date</u>	<u>Description</u>



6. Educational History

Post Secondary:

Dates	Educational Institution	Certificate/Degree

Secondary Education:

Dates	School	Grade	City/Province/Country

7. Other Important Information



7. Other Important Information



7. Other Important Information

After completing this form return it to us by either **email:** info@labourrightslaw.com or via **toll-free fax: 1-877-700-8879**. After returning the form to us, please contact us to arrange for an appointment at a mutually convenient time. **Phone for an appointment: (604) 475-0041 or toll-free: 1-877-708-8350**. Thank you.

Labour Rights Law *
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