

STATE OF CALIFORNIA  
 CALIFORNIA DEPARTMENT OF AGING  
**CALIFORNIA LEGAL SERVICES INTAKE FORM**  
 CDA 1021 (REV 10/2018)



<b>Legal Service Provider Name</b>		
<b>Area Agency on Aging</b>	<b>PSA Number</b>	<b>County Served</b>
<b>Unduplicated Client</b> Yes      No	<b>Client ID Number</b>	<b>Open Date</b>
<b>Unit of Service</b> # of Units of Service (1-Hour increments): _____ Hours		<b>Close Date</b>
<b>Client Name (First, MI, Last)</b>		<b>Client Telephone</b>
<b>Client Address</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Client Date of Birth (month/day/year)</b>		
<b>Client Declined to Provide Information</b>		
<b>Gender</b>  Male Female Transgender Female to Male Transgender Male to Female Genderqueer/Gender Non-binary Not listed, please specify: _____ Client Declined to Provide Information	<b>Sex at Birth</b>  Male  Female  Client Declined to Provide Information	
<b>Sexual Orientation or Sexual Identity</b>  Straight/Heterosexual Bisexual Gay/Lesbian/Same-Gender Loving Questioning/Unsure Not listed, please specify: _____ Client Declined to Provide Information	<b>Ethnicity</b>  Hispanic/Latino	



**Race (check only one)**

- |  |                         |
|--|-------------------------|
|  | Asian/Pacific Islander: |
| Caucasian                              | Asian Indian            |
| African American                       | Cambodian               |
| Native American/Native Alaskan         | Filipino                |
| Two or More Races                      | Japanese                |
| Race Unknown/Some Other Race           | Chinese                 |
| Client Declined to Provide Information | Korean                  |
|  | Laotian                 |
|  | Vietnamese              |
|  | Other Asian             |
|  | Guamanian               |
|  | Hawaiian                |
|  | Samoan                  |
|  | Other Pacific Islander  |

**Client Characteristics (Check All that Apply)**

- |  |   |
|--|---|
| Frail/ Disabled                                  | Limited English Proficiency (LEP)                   |
| Homebound  | Rural   |
| Lives Alone                                      | Greatest Economic Need (Minority)                   |
| Institutionalized                                | Greatest Economic Need (Non-Minority)               |
| Suspected Victim of Elder Abuse/<br>Exploitation | Greatest Economic Need (Minority Status<br>Unknown) |



<b>Type of Cases by Legal Problem Code</b>	
<b>A. Consumer / Finance</b>	
A1.	Bankruptcy/Debt Relief
A2.	Contracts
A3.	Other Consumer/Finance
<b>B. Employment</b>	
B1.	Discrimination
B2.	Other Employment
<b>C. Family</b>	
C1.	Divorce/Custody/Visitation/Grandparents Rights
C2.	Conservatorship
C3.	Other Family
<b>D. Health / Community Based Care</b>	
D1.	Medi-Cal Issues
D2.	Medicare Issues
D3.	Other Health/Community Based Care
<b>E. Housing</b>	
E1.	Landlord/Tenant
E2.	Real Property: Home Loans/Foreclosure/Reverse Mortgages
E3.	Other Housing
<b>F. Income Maintenance</b>	
F1.	Social Security
F2.	SSI
F3.	Pension/Retiree Benefits
F4.	Other Income Maintenance
<b>G. Individual Rights</b>	
G1.	Immigration/Naturalization
G2.	Elder Abuse/Neglect/Exploitation
G3.	Other Individual Rights
<b>H. Miscellaneous / Other</b>	
H1.	Estate Planning/Wills/Trusts
H2.	Advance Health Care Directives
H3.	Power of Attorney
H4.	Other Miscellaneous