

Client Demographic Information Survey

Please fill out the form below. Your answers to these questions will help us continue providing free legal services to our clients. Your answers will have no impact on the services you receive. All information you provide will remain confidential.

Gender

- ☐ Male
- ☐ Female

Age

Please enter your age here. _____

Ethnicity

- ☐ African American
- ☐ American Indian
- ☐ Asian/ Pacific Islander
- ☐ Hispanic or Latino
- ☐ White
- ☐ Other

☐ **Marital status**

- ☐ Divorced
- ☐ Married
- ☐ Single
- ☐ N/A

Household income

- ☐ \$10,000 - \$30,999
- ☐ \$31,000 - \$50,999
- ☐ \$61,000 - \$80,000 or more

Language

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Albanian | <input type="checkbox"/> Hmong |
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Mandarin |
| <input type="checkbox"/> Creole | <input type="checkbox"/> Polish |
| <input type="checkbox"/> Somali | <input type="checkbox"/> Russian |
| <input type="checkbox"/> English | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> French | <input type="checkbox"/> Turkish |
| <input type="checkbox"/> German | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Sign Language | <input type="checkbox"/> Serbian |
| <input type="checkbox"/> Italian | <input type="checkbox"/> Cantonese |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Other |