



LEGAL INTAKE FORM

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____

2. If your complaint involves an inmate in a jail or prison facility, please identify the facility and location:

3. Who is your complaint against?

Name _____
Agency _____
Address _____
City _____ State _____ Zip _____
Phone _____

4. Date of incident giving rise to your complaint? _____

5. What other agencies have you reported your complaint to?

6. If you are a prisoner or detainee complaining about your conditions of confinement, you must exhaust all grievance procedures before contacting us. If this is the case, please describe the grievance process you followed:

7. If you are represented by an attorney in the matter, please provide your attorney's contact information:

Name _____
Firm Name _____
Address _____
City _____ State _____ Zip _____
Phone _____

8. If a criminal or civil lawsuit has been filed against you or on your behalf, please provide:

Case Number _____

Case Title _____

Date case was filed _____

Court with jurisdiction _____

Judge _____

Opposing Counsel _____

Current status of the case _____

9. Please provide a complete and detailed description of the events giving rise to your complaint.

10. Please state clearly what you would like the ACLU of Oklahoma to do for you.*

Please check this box to indicate that the information you have provided is true and correct; that you understand that, by accepting this complaint form, the ACLU of Oklahoma is not agreeing to represent you; and that you understand that the ACLU of Oklahoma is not responsible for ensuring that any statute of limitations requirement or other deadline is met in your case.

Disclaimer and Notice

This Survey does not give legal advice, and you should not rely on it as legal advice. You should not rely on the information you get from this site and should speak with a lawyer to get advice on your specific situation. We also cannot promise that the information on this site is complete, accurate, or up-to-date.

This Survey is not a solicitation or an offer by the American Civil Liberties Union and its affiliates to represent you. We cannot promise you that the information you provide will lead to any specific action on the American Civil Liberties Union or its affiliates part. Once you complete the survey, the American Civil Liberties Union of Oklahoma may not do anything—including contact you—about your situation.

If you fill out this Survey, you agree that the American Civil Liberties Union, the national ACLU or its affiliates, if identified as part of the Survey, or one of its coalition partners may use the information you give us, as long as we don't include your name, address, email or phone number, for one or more of the following purposes: (1) legislative testimony, (2) litigation; (3) contacting a city, state or federal agency; or (4) telling your story to the public, including the media. If the American Civil Liberties Union, the national ACLU or its affiliates, or one of its coalition partners wants to identify you, we will contact you prior to doing so.

We will keep your name, address, telephone number and email confidential unless you give us permission to use it or unless we are ordered to turn it over by a court (although we will attempt to prevent any disclosure).