



Epsilon House, Masterlord Estates
West Road, Ipswich
Suffolk IP3 9FJ
01473 956555

Direct Access Referral Form

CHILDREN

Please complete this form, so far as you are able to do so, in black ink and in capitals, or typed. Some questions may not be relevant, in which case please mark them N/A.

Once complete please email to clerks@cardinalchambers.com

If you have any queries, please contact the clerks on 01473 956555

1. Personal Details:

Full Name:	<input type="text"/>
Date of Birth:	<input type="text"/>
Place of Birth:	<input type="text"/>
Nationality:	<input type="text"/>
Occupation:	<input type="text"/>
Usual hours of work:	<input type="text"/>
Home Address:	<input type="text"/>
Preferred contact telephone number/s:	<input type="text"/>
Email address:	<input type="text"/>

Preferred method of contact: Telephone:
 Email:
 Post:

Have you instructed a solicitor? Yes
 No

Solicitor Name:
 Firm:
 Telephone Number:

Are you or have you been eligible for Public Funding / Legal aid? Yes
 No

Have you previously been represented by or sought advice from a barrister in connection with the matter you now wish to seek advice for, or be represented in? Yes / No

If yes, please provide brief details as to identity and whether advice was given or representation provided, and the dates in so far as you are able.

Barrister	Advice / Representation ?	Date

2. What are the full names of all other parties who are / may be involved in this matter and their relationship to you? Are they represented by solicitors, and if so who?

Name	Relationship to you	Solicitors details

3. The Children

	Full Name of Child:	Date of Birth:	School attended:
1.			
2.			
3.			
4.			

4. Relationship details:

Relationship started:	<input type="text"/>
Marriage Date:	<input type="text"/>
Separation date:	<input type="text"/>
Divorce petition presented on:	<input type="text"/>
Decree Nisi pronounced on:	<input type="text"/>
Decree absolute pronounced on:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

5. Current arrangements for the children

The children spend time with me as follows:	The children spend time with the other parent as follows:

- 6. Do you want advice from a barrister? Yes / No
- 7. Do you want a barrister to represent you at a hearing? Yes / No
- 8. Do you want assistance from a barrister to help prepare your case for a hearing? Yes / No
- 9. If there are current / anticipated court proceedings concerning your children:
 - (i) what applications have been made by you or another person?

Type of Application	Who made by

- (ii) what applications are you anticipating making or being made by you or another person

Type of Application	Who made by

(iii) what hearings have been listed by the court

Date of Hearing	Which Court (where the case is listed)	Type of Hearing (e.g. directions, final hearing etc)	Time estimate allowed by the Court

10. Please set out what the issues are that you wish to seek advice about, and /or that the Court is being asked to make a decision about

Please attach to this Form copies of all orders that have been made in the case (if any) or if you are not able to attach them please give the date of each order and a summary below.

1.	
2.	
3.	
4.	

Visiting Cardinal Chambers:

Will you need help to access the premises? Yes No

Do you require any assistance with interpretation or translation? Yes No

Are there particular times of the day or days of the week that you would like to avoid when arranging any meetings, or telephone conferences? Yes No
If so, please give details:

Signed

Dated