

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

## **Direct Access Referral Form**

FINANCE

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 to <a href="mailto:Clerks@cardinalchambers.com">Clerks@cardinalchambers.com</a>

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

## 1. Personal Details:

Full Name:	
Date of Birth:	
Place of Birth:	
Nationality:	
Occupation: (incl. whether employed / self employed)	
Usual hours of work:	
Home Address:	
Preferred contact telephone number/s:	
Email address:	

	barrister provid ntation ?	e advice /	Date
		e advice /	Date
seek advice for, o	or be represente	d in? Yes / No barrister, wheth	
? Yes No			
	No n represented by seek advice for, c ef details as to th	? Yes No n represented by or sought advice seek advice for, or be representeef details as to the identity of the	? Yes

Separation date:								
Divorce petition presented on:								
De	cree Nisi pronounced on:							
De	cree absolute pronounced on	1:						
Are	e you still living with your spo	use?						
	, you our in ing in in your opo							
4.	Children							
	Full Name of Child:	Date of Birth:	School attende	d:				
1.								
2.								
3.								
4.								
<b>5.</b>	<ul><li>5. Current arrangements for the children</li><li>The children spend time with me as follows: The children spend time with the other parent as</li></ul>							
	s ormaren spena ame warm	e as ronows.	follows:	end time with the other parent as				
6. Finances								
	Approximate Values		You	Your Spouse				
	Income							
	Property							
	Investments							
	Business Assets							
	Other Assets							
	Pensions							
7.	Do you want advice from	a barrister?	Yes / No					
8.	. Do you want a barrister to represent you at a hearing? Yes / No							
9.	Do you want assistance from a barrister to help prepare your case for a hearing?  Yes /No							

If there are current / anticipated court proceedings concerning your children:

10.

(	(i) what applications have been made by you or another person?						
Type o	f Application		, and the second	Who made by			
	(ii) what ap person	pplications are you anticip	pating making or being	made by you or another			
Type o	f Application		1	Who made by			
	(iii) what he	Which Court (where the case is listed)	Type of Hearing (e.g. directions, final hearing etc)	Time estimate allowed by the Court			
		hat the issues are that yo a decision about	u wish to seek advice a	bout, and /or that the Court			
2.							
3.							
4.							

## **Visiting Cardinal Chambers** Will you need help to access the premises? Yes No Do you require any assistance with Yes No interpretation or translation? Are there particular times of the day or days Yes No of the week that you would like to avoid when arranging any meetings, or telephone If so, please give details: conferences? Signed

Dated