

STATE OF CALIFORNIA
 CALIFORNIA DEPARTMENT OF AGING
CALIFORNIA LEGAL SERVICES INTAKE FORM
 CDA 1021 (REV 07/2018)



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



Race (check only one)

Asian/Pacific Islander:

Caucasian

African American

Native American/Native Alaskan

Two or More Races

Race Unknown/Some Other Race

Client Declined to Provide Information

Asian Indian

Cambodian

Filipino

Japanese

Chinese

Korean

Laotian

Vietnamese

Other Asian

Guamanian

Hawaiian

Samoaan

Other Pacific Islander

Client Characteristics (Check All that Apply)

Frail/ Disabled

Homebound

Lives Alone

Institutionalized

Suspected Victim of Elder Abuse/
Exploitation

Limited English Proficiency (LEP)

Rural

Greatest Economic Need (Minority)

Greatest Economic Need (Non-Minority)

Greatest Economic Need (Minority Status
Unknown)



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