**C L I E N T  I N F O R M AT I O N**

|  |  |  |
| --- | --- | --- |
| Name | Sex (M/F) | Occupation (Company name) |
| Nationality | Country of Residence (if residing in South Korea, please state your visa status) | |
| Phone | Email | |

**C A S E  I N F O R M AT I O N**

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| --- | --- |
| **1.** Do you have an ongoing legal dispute in South Korea?  □ Yes           □ No | * 1. Do you know the 'case number'?   (e.g.  'Seoul Central District Court2019godan12345’,’서울중앙지방법원 2019고단12345',    '수원지방검찰청 2019형제12345', etc)  □ Yes, my case number is  **[**            **].**  □ No, I do NOT know the case number |
| **1-2.** Type of Case  □ Criminal □ Business/Corporate □ Family □ Immigration/ Visa  □ Real Estate □ Civil Litigation □ Administrative Litigation | |
| **2.** Are you currently charged with a crime in South Korea? **[please specify the type of crime]**  □ Yes **[ ]**  □ No | **2-1.** If you are a victim of a crime, please check the applicable boxes below.  □ I have already reported **[ ]** .  □ I have not reported **[ ]** and I would like to bring claims/lawsuits. |
| **2-2.** Do you have a criminal record in South Korea? **[please specify the type of crime]**      □ Yes **[**            **]**  □ No | **2-3.** At which stage of procedure does your case is currently being processed?  □ Investigation (Police)  □ Investigation (Prosecution Service)  □ Trial court  □ Appellate court  □ None of the above |

**FACTS AND E V I D E N C E**

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| **3. Please briefly describe the facts (locations, dates, time, people involved, other details of the incidents, etc.) of the case**.  ☞ |
| **4. Please list any evidence, proofs, witnesses in your case (e.g. photos, documents, letters, text messages, recordings, emails, statements, et cetera).**  ☞ |
| **5. Please state approximate amount of damages/compensations in your case (e.g. 50,000,000KRW).**  ☞ |
| **6. Please tell us about what you expect to get from this legal consultation.**  ☞ |

**P R E F E R E N C E S**

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| **Consultation method [please specify date & time/ e.g. PST 14:00 May 21. 2020]**  □ by phone  **[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]**  □ by email  **[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]**  □ by visit    **[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]** |  |

**A C K N O W L E D G E M E N T   A N D   A C C E P T A N C E**

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| --- | --- |
| □ I accept and agree to provide my personal information by completing and sending this consultation request form to Law Win and to pay consulting fees in advance for Law Win's authorized online consultation service. | |
| **Date** | **Name (signature)** |