

# Family Law Service Needs Assessment

Date: \_\_\_\_\_

To: [Client's Name]

From: [Your Name]

[Your Position]

[Firm/Organization Name]

[Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

Dear [Client's Name],

We are reaching out to you as part of our Family Law Service Needs Assessment process. This assessment will help us understand your unique situation and the support you require.

Please take a moment to provide us with the following information:

- **Brief description of your legal issue:** \_\_\_\_\_
- **Current status of your case:** \_\_\_\_\_
- **Specific areas where you need assistance:** \_\_\_\_\_
- **Any deadlines we should be aware of:** \_\_\_\_\_
- **Preferred communication method:** \_\_\_\_\_

Once we receive your responses, we will arrange a follow-up meeting to discuss your needs in more detail. Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Position]

[Firm/Organization Name]