Mediation Appointment Questionnaire

Petitic	oner:	(Person who filed first)			
	(Person who filed first				
Respo	ondent: (Person responding to the Petitioner		Today's Date		
(Person responding to t		e Petitioner's filing)			
Media	tion appointment:	Date_		Time	
PENDIN	G COURT DATE	Are	you modifying	an existing court order?	
	OR OTHER PERSON REQUESTING MEDIATI				
INTERPR	ETER NEEDED AT APPOINTMENT?:	Y	N	Which language?	
Will either parent need to participate by phone?		Y	N	Which parent?	
Petitio	ner (print):		Respond	dent (print):	
			-		
	ZIP			ZIP	
Phone#:	Alt #			Alt #	
Email:			Email:		
Attorney	(if known):		Attorney (if known):	
CHILD	REN'S NAMES/AGE: Our Joint Children	n:			
Name(s):	Age:		Living with whom:	
Hoolth n	robloms of the shild/shildren.				
	roblems of the child/children: Iren wards of the court/under state supervi		oro a juvonilo	case pending: Ves No	
	inen wards of the could under state supervi	310117 01 13 011			
ARE TH	ERE ANY DOMESTIC VIOLENCE ISSUES	? Please	Summarize:		
No	Contact Order R/O/FAPA	Dom. Viole	nce Criminal	Case Stalking Order None	
	was the Order specifically modified to a				
	ty Issues Prompt Separate Waiting Ro				
	have such concerns, please contact the	-			
	. DATE OF LAST MEDIATION SESSION (if a		-		
	NT TO PARTICIPATE IN FAMILY LA				
1.		have about m	y personal safe	ty and the existence (past or present) of a restraining order,	
2.	To participate in mediation to try to resolve the	e issues of my	v case.		
3.	To listen respectfully to the other person's cond	-		k without interruption.	
4.			-	to notify the mediator if either party decides to end participating	
5.	To not hold the mediator liable for the outcome agreement is my own choice.	of any agree	ments that may	be reached in this process since whether or not I sign a written	

Date:_____Signature:_____