



## Civil and Domestic Mediation Scheduling Form

### **STEP ONE**

Civil Action #: \_\_\_\_\_ County: \_\_\_\_\_

Style of Case: \_\_\_\_\_ vs \_\_\_\_\_

Name of Mediator: \_\_\_\_\_ Location of Mediation: \_\_\_\_\_

Date of Mediation: \_\_\_\_\_ Time of Mediation: \_\_\_\_\_

### **STEP TWO**

#### PLAINTIFF'S DATA

\_\_\_\_\_  
Name: (Last, First MI)

\_\_\_\_\_  
Mail Address

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Attorney's Name

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Phone / Fax

\_\_\_\_\_  
Email

#### DEFENDANT'S DATA

\_\_\_\_\_  
Name: (Last, First MI)

\_\_\_\_\_  
Mail Address

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Attorney's Name

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Phone / Fax

\_\_\_\_\_  
Email

### **STEP THREE**

No unilateral scheduling is permitted. **By signing below, I am stating that the choice of mediator, date, time, and location listed above is the result of a mutual decision made between Plaintiff(s), Defendant(s), and Mediator.**

\_\_\_\_\_  
Print Name: (Last, First MI)

\_\_\_\_\_  
Attorney Office

\_\_\_\_\_  
**Signature Required** / Date

\_\_\_\_\_  
Phone

Please give a brief description of any special circumstances. \_\_\_\_\_

**It is essential that copies of all documents bearing on issues to be resolved be brought to the mediation session (financial, medical, business, etc.)**

### **STEP FOUR**

**Domestic Relations Only** (please circle appropriate response)

**Divorce:** Alimony / Child support / Custody / Debt Division / Property Division

**Modification:** Alimony / Child Support / Custody / Visitation

Are there concerns of abuse (spouse, child, substance, etc) that are alleged or otherwise indicated? Y / N