



Family Mediation Intake Form

This form is private and confidential. It is provided as part of a confidential (closed) mediation process. The only exception will be if the safety of a child is at risk or if there are threats of imminent harm to yourself or another person. Otherwise we will not share any of this information without your consent.

Date: _____

Referred By – Lawyer, Judge, Self, Other: _____

PERSONAL INFORMATION

First Name _____

Middle Name(s) _____

Surname _____

Date of Birth _____

Telephone Number/Cell Number _____

Street Address _____ Postal Code _____

City _____ Province _____

Email _____

Is it okay to email you at the above address? Yes – No

Is it okay to leave a phone message at the above number? Yes - No

Name of Employer/Nature of Job _____

Work Phone Number _____

Is it okay to call at work? Yes – No

Do you have any disabilities you would like us to know about that could affect your participation in mediation?

THE OTHER PARTY

First Name _____

Middle Name(s) _____

Surname _____

Date of Birth _____

Contact Information _____

Name of Employer/Nature of Job _____

Is the other party agreeable to mediation? Yes – No – Unknown

Is it okay for the mediator to contact the other party using the contact information provided above? Yes – No

CHILDREN

List the names, dates of birth, and place of residence of any children from this marriage/relationship.

List the names, dates of birth, and place of residence of any children you have from a previous relationship.

BACKGROUND INFORMATION

Date of Marriage/Cohabitation _____ Date of Last Separation _____

Who decided to end the relationship? You - Other

Do you have any interest in reconciliation with this person? Yes - No

Do you have a lawyer? Yes – No - If so, what is the name, telephone number and email address?

Does the other party have a lawyer? Yes – No - Unknown

Have you or the other party started Court proceedings? Yes – No
If so, briefly explain.

When is the next Court date? (If applicable) _____

Are there any legal reasons (i.e. No Contact Order/Peace Bond) that prevent you from communicating directly or indirectly with this person? Yes – No
If so, explain.

Have the police been involved with your family? Yes - No

Has the Ministry of Children and Family Development been involved with your family? Yes – No

Do you have any concerns about being in the same room with the other party with the mediator present? Yes – No

Is there anyone else that you would like to see participate in the mediation? (i.e. family member, support person)

Do you have any concerns for the safety of the children? (If applicable)
Yes – No

What is one positive thing about the other party?

CLARIFYING THE ISSUES

Please provide a brief history of the marriage/relationship. (Just a short, quick summary for future discussion. Use a separate sheet if necessary)

What are the reasons that best explain why you are separating? (i.e. Physical abuse/violence, Threats, Drug/alcohol abuse, Mental illness, Infidelity, Poor communication, Emotional abuse, Incompatibility, Great deal of conflict)

What are the issues you wish to discuss in mediation, and why are they important to you? (These issues will be discussed and expanded in more detail later. Use a separate sheet if necessary)

What do you believe is the greatest obstacle to reaching an agreement in mediation?

Is there anything else you would like us to know?



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ALTERNATIVE DISPUTE RESOLUTION