

ALISON VAWTER, ATTORNEY AT LAW
Mediator

MEDIATION INFORMATION FORM

Information About Mother:

Full Name: _____

Maiden or Former Name(s): _____

Residence Address (number & street, city, state, zip code & county): _____

Telephone Number(s): _____ (H) _____ (W) _____ (Cell Phone/Other)

Date of Birth: _____ Age: _____

Place of Employment (include address): _____

Job Title: _____

Attorney's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Information About Father:

Full Name: _____

Former Name(s): _____

Residence Address (number & street, city, state, zip code & county): _____

Telephone Number(s): _____ (H) _____ (W) _____ (Cell Phone/Other)

Date of Birth: _____ Age: _____

Place of Employment (include address): _____

Job Title: _____

Attorney's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Information About Marriage/Dissolution (if applicable):

Date of Marriage: _____

Place of Marriage: (city, state & county): _____

Have wife and husband separated (Y/N): _____ If so, date of separation: _____

Date of Dissolution: _____

County: _____ Case Number: _____

Information About Relationship (if parties were never married):

Date Relationship Began: _____

Date Relationship Ended: _____

Were you living together when the child(ren) was born? (Y/N): _____

If yes, provide dates inclusive that you resided together: _____

If there a court order regarding paternity or Acknowledgement of Paternity for the child(ren)?(Y/N): _____

If yes, please describe: _____

Information About Child(ren):

Is Mother pregnant? (Y/N): _____

Is Father biological father? (Y/N): _____

Did the parties adopt any child(ren) during their marriage/relationship? (Y/N): _____

Please provide the following information for each child born to the parties: (if you need more space, use the back of this sheet):

1. Full Name: _____ Living with whom: _____

Date of Birth: _____ Age: _____

2. Full Name: _____ Living with whom: _____

Date of Birth: _____ Age: _____

3. Full Name: _____ Living with whom: _____

Date of Birth: _____ Age: _____

4. Full Name: _____ Living with whom: _____

Date of Birth: _____ Age: _____

Has a Guardian *Ad Litem* or Child's Representative been appointed? (Y/N): _____

If yes, provide his/her name: _____

Referred for Mediation By:

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

May the mediator contact this person? (Y/N): _____

Since mediation is a process where you can craft a settlement to meet your needs, it is helpful if you prepare for the mediation by thinking about what your goals are; what has kept you from settling; what criteria you will use to evaluate offers presented at the mediation; and what the other side will need to hear in order to accept your offer.

Please briefly explain the specific issue or issues that you want to address in mediation in the space provided below:

Mother's Signature

Date

Father's Signature

Date