



## Mediation Information Form

*Please give the following information before the initial meeting.*

***Please note that information in this form may be shared with your husband/wife/partner (except an address or telephone number you may wish to keep private, see Section 8 below).***

### 1. Your personal details

Full name:.....

Date of birth:.....

Home address.....

.....

Tel:..... Fax:.....

Mobile Number.....

Email:.....

Work address if no DX.....

.....

Tel:..... Fax:.....

E-mail:.....

At which address is it most appropriate for us to contact you?

### 2. Relationship information

Date of marriage:.....

Start date of any cohabitation:.....

If separated, date of separation.....

If living together, do you wish to consider separation?.....

Do you think that the relationship has broken down permanently?.....

Have you and your husband/wife/partner discussed  
divorce/dissolution?.....

If so, have you reached any agreement ?.....

### 3. Children

Please give the following information for any children you and/or your husband/wife/partner have:

**1st child:**

Name:..... Date of birth:.....

If relevant, current place of education:.....

Any special needs?.....

**2nd child:**

Name:..... Date of birth:.....

If relevant, current place of education:.....

Any special needs?.....

**3rd child:**

Name:..... Date of birth:.....

If relevant, current place of education:.....

Any special needs?.....

**4th child:**

Name:..... Date of birth:.....

If relevant, current place of education:.....

Any special needs?.....

*If there are more than four children, or if there are any other dependants, please continue on a separate page.*

Who are the children currently living with?.....

If you are separated from the other parent, do the children have contact with him/her?.....

Do you have Parental Responsibility for the children?     Yes  No  Not sure

Is Parental Responsibility an issue?     Yes  No  Not sure

Are the children aware of the situation between you and your husband/wife/partner?.....

#### 4. Other dependants

Please give information for any other dependants/people you care for:

Name/s:.....

Any special needs?.....

#### 5. Preliminary financial outline

*If you want to consider financial issues, we will give you a detailed financial form to complete.*

##### Where you live:

Address (if different from home address in Question 1)

.....  
.....

Is this the property where you and your husband/wife/partner live or lived together?.....

Is it rented or owned?                      Rented                            Owned     

In whose name is it?                      Joint            Sole            Whose sole name?.....

If owned, estimated current value..... and mortgage balance .....

##### Employment:

Your occupation?.....Current salary (gross).....

If employed, name of employer.....

If self-employed or in partnership, estimate of current annual earnings.....

To what date are accounts available?.....

##### Other sources of income:

Do you have any other sources of income? If so, estimated amount.....

and source.....

(No further details required at this stage.)

## 6. Professional representation and support

Do you have a solicitor? What is their name and address?

.....  
.....  
.....

Have you had any counselling or therapy relevant to the relationship problems?  
If so, from whom? Was it individual, as a couple, or as a family?

.....

Are you still having counselling or therapy?.....

Have any other professional services been involved with your family e.g. Social  
Services? If so, please indicate when and where.....

.....

## 7. Legal proceedings

Have any court proceedings started? If so, what proceedings, in what court, and  
what stage has been reached?

.....  
.....

Is there a pending hearing date for any proceedings? If so, what is it?.....

Has a Child Support Assessment or maintenance order been sought or made in  
relation to any child? If so, please give details.....

.....

Has an order been made, sought or threatened to protect any member of the  
family or their property? If so, please give details.....

.....

## 8. Confidentiality

Do you want an address or telephone number kept confidential? If so, please tick  
Yes

***Note that this form may be copied to your husband/wife/partner/others  
engaged in the mediation process or the information shared. If you do  
not want this done at this stage, please tick***

## 9. Outline of issues for discussion

Might you want to address or receive information on any of the following? (this indication will not limit the issues that can be discussed in the mediation):

- |  |  |
|--|--|
| Future of the relationship                 | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Arrangements for separation                | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Review of existing agreement or order      | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Any question of behaviour, threat or abuse | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Parental responsibility for children       | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Any other issues concerning children       | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Financial/property issues                  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |

- Meetings are ordinarily held with all parties together. Does this create any concerns for you? Yes  No  Not sure
- Do you feel able to discuss this openly? Yes  No  Not sure

## 10. Your aims in mediation

Please would you say what your aims are in coming to mediation. We appreciate that you may need to know more from the mediator(s), but it would help to have some preliminary idea of what you hope to achieve in broad terms, not in detail.

***Please do not provide information or send copies of correspondence that cannot be mentioned in discussion with you all or copied to one another.***

*(This does not apply to a private address or telephone number if you wish to keep this confidential from your partner/former partner – see Section 8 above.)*

Signed.....

Date.....