

INFORMATION FOR SCHEDULING MEDIATION PRIOR TO TRIAL SETTING

Date: _____ Case No.: _____ Div. No.: _____

TYPE OF CASE: DIVORCE _____ PATERNITY _____ MODIFICATION _____ CUSTODY BY FAMILY _____

OTHER (SPECIFY) _____ . IS EITHER PARTY CERTIFIED AS INDIGENT? _____

PETITIONER: _____
(Please circle) Mr. Mrs. Ms.

RESPONDENT: _____
(Please circle) Mr. Mrs. Ms.

YOUR **ANNUAL GROSS** INCOME; \$ _____

YOUR **ANNUAL GROSS** INCOME; \$ _____

Your Address or attorney's if you have an attorney

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ADDRESS: _____

ADDRESS: _____

DAYTIME TELEPHONE # _____

DAYTIME TELEPHONE # _____

FAX NUMBER _____

FAX NUMBER _____

EMAIL: _____

EMAIL _____

ATTORNEY: _____

ATTORNEY: _____

G.A.L. (IF ANY): _____

GAL TELEPHONE NO: _____

GAL ADDRESS: _____

Please check issues: Parental Responsibility _____; Time-Sharing _____; Child Support _____;
Equitable Distribution (assets/debts) _____; Possession of Home _____; Attorney Fees _____;
Alimony/Spousal Support _____; Other(_____) _____.

Have you ever been involved with any other family case (DIFFERENT CASE NO.) with this party? _____

State or County of Origin _____ If Orange County case, what is the case number _____

The mediation should generally be conducted within 30-45 days unless extended by agreement of parties.

You may call the mediation office at **(407) 836-2004** to obtain a date and time for mediation.

You may also check the website for *Available Dates* at <https://www.ninthcircuit.org/mediation/MedsAvail.htm>.

Fax this Information Form to (407) 836-2367 or email it to OrangeCountyDRS@ocnjcc.org or Mail it to Dispute Resolution, 425 N. Orange Avenue, Room 120, Orlando, FL 32801.

By signing this form, I am declaring that to the best of my knowledge there is no significant violence or substance abuse which would impede the mediation process. (If you feel that you will not be able to make decisions without being intimidated by the other party, please call us at 407-836-2004.)

SIGNATURE

cc: ___ Respondent (or Att'y) ___ Petitioner (or Att'y) cc: ___ Domestic Clerk

***This Form 50 may expire in 30 days at which time it may be discarded. After that you may need to refile.**