

THE MEDIATION CENTRE REFERRAL

Date of Referral: _____ • New • Return → prior file # _____

Date of Consent: _____

REFERRAL SOURCE:

• Self Mrs. • Self Mr. • Self Both • Judge • Duty Counsel • On-site Mediator

• Court Staff • IRC • Lawyer • Clerk (1st appearance) • Other _____

COURT RELATED:

• No • Yes → Court File #: _____ next return date: _____

Stage of proceedings: • prior to 1st appear. • 1st appear. • case conf. • sett. conf. • trial mgmnt.

ISSUES TO BE MEDIATED:

PARENTING:

• custody/decision making

• residential plan

• time sharing

• involvement of others

FINANCIAL:

• child support

• spousal support

• division of property

• other: _____

Notes:

	FATHER	MOTHER
Name		
Address		
D.O.B.		
Employment		
Best time for appt.'s		
Res. Phone		
Bus. Phone		
Other Phone/Contact		
Email		
Lawyer		
Lawyer's Phone		
Income/Fees Set At:		

Date of Marriage: _____ Date of Separation: _____ Date of Divorce: _____

CHILDREN	SEX	DATE OF BIRTH	RESIDING WITH:

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