

# CONCILIATION COURT INFORMATION SHEET

(Court Use Only)

Case #: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Education

Mediation

Conciliation Court Counseling

**Instructions** – You have been ordered to Conciliation Court. **This form must be completed in full and returned to the ADR Department within TEN (10) days of Court Order.** If you do not answer all questions, the form will be returned to you, resulting in a delay of the proceedings.

This document is confidential and for use by Alternative Dispute Resolution (ADR) Services only. Neither this document nor the information contained herein may be disclosed to the Court, attorneys or interested parties. This document is not subject to subpoena. Once the ADR Department has received the completed form, you will be notified of your appointment time.

WILL INTERPRETER SERVICES BE NEEDED  Yes  No

LANGUAGE BEING REQUESTED

**→ List any dates you are NOT available in the next 60 days.** If you leave this space blank, we will presume you are completely open and will schedule accordingly. **Attorneys are not required to attend mediation. If your attorney is planning to attend, your attorney must also list any dates he/she is NOT available in the next 60 days.**

1. First Name: _____		Petitioner	
Middle Name: _____		Respondent	
Last Name: _____		3 <sup>rd</sup> Party/Intervenor	
2. Mailing Address: _____		3. City: _____	4. State: _____
		5. Zip: _____	
6. Telephone (Home): _____	7. Telephone (Work): _____	8. Cell Phone: _____	9. E-mail Address: _____
Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this a protected address? <input type="checkbox"/> Yes <input type="checkbox"/> No (If you do not know what protected address means, do not mark yes)		Case Number: <b>1300DO</b>	
10. Do you have a lawyer representing you on this case? <input type="checkbox"/> Yes <input type="checkbox"/> No		11. If yes, Name: _____	
12. Are you currently married to the other Party? <input type="checkbox"/> Yes <input type="checkbox"/> No		13. Were you ever married to the other Party? <input type="checkbox"/> Yes <input type="checkbox"/> No	
14. When was your divorce granted? _____		15. Is there a current Court Order establishing Legal Decision-Making and Parenting Time? <input type="checkbox"/> Yes <input type="checkbox"/> No	
16. Briefly and specifically, describe the current disagreement and what you would like to accomplish in mediation. _____ _____			
17. Provide the names and birthdates of your child(ren) involved in this case. With whom do they reside? _____ _____			
18. Have you ever been to mediation before? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, where and when?)			
19. Have you completed mandatory Parent Education? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Scheduled			
20. Is there currently an Order of Protection in effect against you or the other party? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure (If you answer yes, in what County/Jurisdiction is it filed? Please provide an explanation or the form will be returned for an explanation) (If yes, please bring copy to mediation)			

21. If there is a current Order of Protection in place, are any children a part of it? (If you answer yes or unsure, you must provide an explanation or the form will be returned for an explanation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
22. Has the Department of Child Safety (DCS) ever been contacted in this matter?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
23. If DCS has been contacted, is there currently an open investigation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
24. Use this space for comments or concerns you may have regarding our services.	
25. If you are at the Prescott Courthouse, please leave this completed form with the Alternative Dispute Resolution Office on the fourth floor, or with the Bailiff in the courtroom you are in. If you received this form in the mail/email, return it to the address listed in <b>box 26. Or email to: <a href="mailto:yavapaiadr@courts.az.gov">yavapaiadr@courts.az.gov</a></b>	26. <b>Arizona Superior Court Yavapai County Courthouse – ADR Services 120 South Cortez; Room 402 Prescott, AZ 86303 (928) 777-3067 (phone) (928) 771-3389 (fax)</b>

Please read the following Mediation Procedures and Rules. If this form is not signed and returned in a timely manner, it may delay the processing of your case. Thank you for your cooperation.

**Mediation Procedures**

- Allow up to **4 hours** for session.
- If no agreement is reached, the Court will be informed of such.
- If an agreement is reached, it will be filed with the Court after each individual signs the agreement.
- The Court will be informed if someone fails to appear for a scheduled appointment without the proper notice to the Conciliation Court.

To promote a safe environment and positive communications during mediation, we request you observe these rules. It is important you understand and agree to the Mediation Rules. If they are not followed, the mediators have permission to end the session. If you have questions, please contact us in advance.

**Mediation Rules**

1. Be courteous and respectful to each other and to the Mediator. Talk one at a time.
2. Express any anger appropriately.
3. Stay in the room unless the Mediator gives you permission to leave. You may request a short break during the mediation session.
4. Be honest and share all information pertinent to the issues.
5. Focus on what is best for the children.
6. According to ARS 12-2238, the mediation/conciliation process is confidential. This extends to notes taken during session, which will be destroyed at the conclusion.
7. The Mediators, along with office policy, will determine the number of times the parties will be required to meet.
8. The Mediators will be impartial, will not take sides and will not make decisions for anyone in the mediation.
9. You are not required to reach an agreement.
10. You are required to participate in good faith.
11. Recording devices are not permitted. Cell phones must be turned off.
12. No weapons of any kind are permitted in the building.

**By the signature below, I acknowledge I have read and understand the above Mediation Procedures and Mediation Rules: I understand and agree to abide by these rules.**

Signature	Date
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**COURT USE ONLY**

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