

**CONFIDENTIAL**

## Mediation preliminary information form

Thank you for agreeing to meet with me to consider whether mediation may be helpful to you in resolving things with your partner/former partner. The attached form is designed to provide preliminary information about you and your situation to assist in planning your mediation process. Please note that coming to meet with me to discuss resolving things between you does not commit you in any way to mediation. It will be important that you, your former partner and I *all* agree that mediation would be an appropriate way forward.

Please note that not all sections may apply to you – for example, if you are planning to mediate in matters regarding your child or children, you will not need to complete those sections relating to your financial situation, but remember that it might be relevant where financial support for your child or children may be an issue you wish to discuss.

It is important that you complete Section 9 which relates to your aims in coming to mediation as this assists me in understanding what you hope to achieve as a result of choosing mediation.

Please therefore complete all sections that you think apply to you and the issues which you wish to discuss or resolve together should you subsequently choose mediation. Completed preliminary information forms are subject to our privacy arrangements in respect of data protection, will be kept confidentially by me and information you have provided on this form will not be shared with anyone else without your permission (and I will discuss any exception to this with you and explain arrangements in relation to data protection). Please note that your address and contact details can be kept wholly confidential from your former partner if you wish – please indicate if this is the case at Section 1b. of the form.

I shall look forward to meeting you.

Please return completed form to:

# Mediation preliminary information form

This form is approved by Resolution for use by independent professional mediators who mediate as members of Resolution. The information provided by you will not be shared without your expressed permission, will be securely stored and destroyed in line with our Privacy Notice/Policy.

**Please return the following preliminary information before your initial meeting.**

1.a. Your personal details	
Your name:	Date of birth:
Home address:	
Postcode:	Tel:
Mobile:	Fax:
Email:	
Work address:	
Postcode:	Tel:
Mobile:	Fax:
Email:	
At which address/phone number/email is it most appropriate for me to contact you?	
It would be helpful to have your National Insurance number if you know it:	

### 1.b. Confidentiality

Do you want your address and/contact details kept confidential? If so, please tick  yes

### 2. Relationship information

The name of your husband/wife/partner:

Their address and contact details:

Postcode:

Tel:

Email:

Date of marriage:

Date of start of any cohabitation:

If separated, date of separation:

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

Do you think that your relationship has come to an end permanently?

- yes  
 no  
 not sure

Have you and your husband/wife/partner discussed divorce/separation?

If so, have you reached any agreement about divorcing or separating?

**Please turn over**

### 3. Children

Please give the following information concerning any children you and/or your husband/wife/partner are parents to:

#### First child

Name:

Date of birth:

If relevant, current place of education:

Any special needs?

#### Second child

Name:

Date of birth:

If relevant, current place of education:

Any special needs?

#### Third child

Name:

Date of birth:

If relevant, current place of education:

Any special needs?

#### Fourth child

Name:

Date of birth:

If relevant, current place of education:

Any special needs?

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

With whom are the children currently living?	
If you are separated from the other parent, are there arrangements in place for them to spend time with their other parent?	
Do you have Parental Responsibility for the children?	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not sure
Is Parental Responsibility an issue?	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not sure
Are the children aware of the situation between you and your husband/wife/partner?	

#### 4. Anyone else who is dependent upon you

Is there anyone else e.g. a parent or other child or family member for whom you have caring responsibilities or who is dependent upon you financially or practically for support/assistance?	<input type="checkbox"/> yes <input type="checkbox"/> no
Please provide brief details here:	

**Please turn over**

## 5. Preliminary financial outline

The following preliminary information is requested. If financial issues are to be considered as part of your mediation, a more detailed financial form will be provided and discussed with you both.

### The property 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: £

Mortgage balance: £

### Employment

What is 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

Are you represented by a solicitor? If so, what is her/his name and address?

Name:

Address:

Have you had any professional support (counselling or personal/relationship support) relevant to your relationship? If so, from whom? Was it individual, as a couple, or as a family?

Is that support continuing?

- yes  
 no

Have any other professional services been involved with your family e.g. Local Authority Children's Services? If so, please indicate when and where:

## 7. Legal proceedings

Have any court/legal proceedings started? If so, what proceedings, in which 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. What is important for you to discuss or have information about?

Would you like to address or receive information on any of the following? (This indication will not limit the issues that can be discussed in any subsequent 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 order	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Your children and managing parenting	<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
Financial/property issues	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Questions/information about behaviour/threat/harassment/harm or abuse	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Debt or other financial hardship	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Mediation is usually conducted with both of you present together. Does this create any concerns for you?	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Do you feel able to discuss this openly?	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> not sure
Other (please specify here):			



## 9. Your aims in mediation

Please would you say a little about what it is that is important for you to deal with and what you hope to achieve by coming to mediation. I appreciate that you may need to know more from me about how you might reach a resolution but it would help to have some preliminary idea of what you hope to achieve in broad terms, not in detail.

**Please turn over**

<b>Signed:</b>
<b>Date:</b>

**Thank you for having taken the time to complete this form.**