HOEFLE LAW MEDIATION CENTER

FAMILY INTAKE SHEET

(To Be Completed by Each Party)

Date: \_\_\_\_\_\_\_\_\_\_ Name: (Please use full legal name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I can leave a text/verbal message at:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the other party you want to mediate with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was your mediation Court Ordered? \_\_ Yes \_\_ No Court/Case Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the relationship between the two parties? (Family, co-workers, friends, neighbors etc.)

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Is it emotionally difficult for you to consider meeting face to face during mediation? Yes\_\_ No\_\_

Do you prefer Zoom Mediation? Yes\_\_ No\_\_ Do you have a stable internet source? Yes\_\_ No\_\_

Please explain your concerns relevant to the situation: (e.g., abuse in the form of verbal,

emotional, physical, retaliatory, drugs/alcohol involvement.)

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This form is being provided to you so that issues that are important to you will not be overlooked or forgotten. Mediation is your opportunity to talk about the issues that concern you. At the start we will agree to a list of the matters we need to discuss. In that way we can hold a balance between the issues and not lose sight of our focus. On the lines below, please write down the issues you would like to resolve in the mediation session in order of priority. Describe in more detail than listed above.

Priority 1.

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Priority 2.

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Priority 3.

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Please explain any reasons for or issues with resolving the matters in this order:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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This is a list of possible issues involved in family separation/divorce. Please use this as a

guideline to sort through the best possible solutions for your family circumstances. Remember

that what is the highest and best for the children involved is usually what legal authorities will

recommend and will mandate. Please place a number on the line next to the statement using:

1 = MOST IMPORTANT TO ME

2 = important

3 = somewhat important

4 = will not affect me

CUSTODY:

I want Sole legal custody

I want Shared custody

I want a Time-share plan

GENERAL SCHEDULE, HOLIDAYS, RELIGIOUS CELEBRATIONS

Weekly Schedule – what days to be with whom? Nights? Days? Who picks up from school,

sports practice, etc.

Monday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tuesday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wednesday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thursday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Friday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Saturday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sunday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_ Summer Vacation

\_ Halloween (trick or treating, costume)

\_ Veteran’s Day

\_ Thanksgiving Day weekend

\_ Hanukkah

\_ Winter Break

\_ Christmas Eve/Day

\_ New Year’s Eve/Day

\_ Martin Luther King Day

\_ President’s Day

\_ Spring Break

\_ Easter

\_ Mother’s Day/Father’s Day

\_ Independence Day

\_ Labor Day/Weekend

\_ Child(ren’s) birthday

\_ Parent’s birthday

\_ Other 3-day weekends resulting from legal school holidays

\_ Guidelines for Flexible Time

\_ OK to be initiated by a parent?

\_ OK to be initiated by a child?

\_ Holiday schedule supersedes Weekend schedule? (e.g.: Christmas comes on a different

day of the week each year)

**Transportation & Responsibility for Meals**

\_ Sharing transportation within \_\_\_\_\_\_ miles without renegotiating

\_ For sharing time with parents

\_ For medical appointments, extracurricular activities, school attendance

\_ Who has responsibility for feeding children when exchanges occur at meal times?

**Emergencies/unavoidable time changes**

\_ Arrangements when a parent is ill

\_ Arrangements when a child is ill

\_ Calling ahead if vary time exchange by more than \_\_\_\_\_\_ minutes

\_ Unavoidable change in work schedule

**Parental Decision Making**

\_ Making an effort to work together?

\_ Major Life Decisions: child(ren’s) residence, education, health care providers & procedures, spiritual training, extracurricular sports/other activities

**Other circumstances that arise**

\_ Circumstances that are considered dangerous

\_ Decisions about; haircuts, hair coloring, tattoos, piercing

\_ Day-to-day decisions

\_ Address for school records

\_ Joint school conferences/teacher meetings

\_ Address for medical records

\_ Future conflict resolution process (see Other Considerations below)

**Parental Communications**

\_ As needed?

\_ Scheduled? When \_\_\_\_\_\_\_\_\_\_\_\_\_\_? How \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

\_ Agreement to discussing difficult issues in front of child(ren)

\_ Parent agreement to discuss issues: Home phone? Cell? Email? Text? Work?

\_ Discussing ground rules to avoid arguments

\_ Agreement on consistent ground rules

**Communicating with a child – cell phone/land line?**

\_ At parent’s initiative: unlimited/limited reasonable hours \_\_\_\_\_\_\_\_\_\_\_\_

\_ At child’s initiative: unlimited/limited reasonable hours \_\_\_\_\_\_\_\_\_\_\_\_

**Allowing for respectful sharing and caring of parents and extended family needs**

\_ Access to other parent, extended family members

\_ Not estranging children from other parent

\_ Refraining from arguing, making derogatory comments about other parent

\_ Not discussing the financial settlement of the separation/divorce with the children

\_ Not blaming the other parent for the divorce in front of the children

**Substitute Child Care**

\_ Other parent to have first option if child care needed in excess of \_\_\_\_\_ hours

\_ Responding to request within \_\_\_\_\_ hours

\_ If parent not available, then who:

\_ Mutually acceptable child care providers -or- Alternate child care at parent’s discretion

**Health and Well-Being**

\_ Stability and continuity

\_ Same routines (bed and meal times)

\_ Same expectations (chores, homework, discipline, diet, hygiene)

\_ Cooperative and unified parenting response

\_ Discipline

\_ Notification of intent to take child out of state

\_ Not using a child to relay a message to the other parent

\_ Not asking child about personal life of other parent

\_ Not asking child to keep a secret from the other parent

\_ Not using a child as a confidante or depending on child for emotional support

\_ Responsibility for annual medical/dental examinations

\_ Safety devices: driving, bicycling, boating, skateboards, etc.

\_ Violence

\_ R-rated movies

\_ Alcohol and drug use when child is present

\_ Second hand smoke

\_ Guns and other arms

\_ Changing child’s name

\_ Calling another adult “Mom” or “Dad”

\_ Child’s sleeping arrangements

**Children’s Possessions**

\_ Books, toys, clothes, pets

\_ Exchanged between households? Redistribute as needed?

\_ Kept in separate households?

\_ Packing and returning children’s possessions

\_ Needs for special clothing, equipment for particular activity

**Introducing and Integrating a child/other parent to a new partner**

\_ Discuss when and how other parent to be informed

\_ Proper discussion with child(ren)

\_ Living arrangements discussed

**Financial Responsibility for Child’s Expenses**

\_ Child support

\_ Housing, food, clothing, utilities

\_ Work-related child care

\_ Extraordinary expenses; sports, equipment, lessons, major clothing purchases, school supplies

\_ Review – if income, time, or expenses change

\_ Educational expenses; college, private schools

**Other Considerations**

\_ Life Insurance – to help raise children if parent becomes deceased – Amount/Beneficiary

\_ Agreement to have a Will drawn up

\_ Percentage of net estate to the children?

\_ Legal guardians

\_ Health insurance

\_ Uninsured health care expenses

\_ Gifts to the Children

\_ Dependent deductions and Head of Household filing status

\_ Future conflict resolution process; Direct negotiation, Gathering information; seeking second opinions, Mediation

**Future Review of Parenting Arrangements**

\_ How often? Annually? Biannually?

\_ Remarriage or cohabitation of either parent

\_ Change in employment status

\_ Accident/disability of either parent

\_ Family emergency

\_ Child’s adjustments/developmental needs

\_ Child’s request

\_ Upon recommendation of child’s teacher or counselor

\_ What if either parent moves more than \_\_\_\_\_ miles from the other parent?