



185 Somerset Street West, suite 202  
Ottawa, Ontario K2P 0J2  
Tel: 613-237-1807; Fax 613-237-9959

## APPLICATION FOR MEDIATION SERVICES

This document is confidential

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
(yyyy) (mm) (day)

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

E-mail \_\_\_\_\_

Circle telephone number we can use to contact you.

May we communicate with you by email? Yes \_\_\_\_\_ No \_\_\_\_\_

What is your first language \_\_\_\_\_

Annual income \_\_\_\_\_

Date of marriage \_\_\_\_\_ Date of cohabitation \_\_\_\_\_  
(yyyy) (mm) (day) (yyyy) (mm) (day)

Date of separation \_\_\_\_\_  
(yyyy) (mm) (day)

Do you have a domestic contract? Yes [ ] No [ ] (If so, please provide a copy)

Are you still living in the same residence? Yes [ ] No [ ]

Are you in a significant relationship with another adult? Yes [ ] No [ ]

Are you sharing a residence with that person? Yes [ ] No [ ]

Have you obtained legal advice about your situation? Yes [ ] No [ ]

Lawyer's name \_\_\_\_\_ Telephone \_\_\_\_\_

Have you started legal proceedings? Yes [ ] No [ ]

If so, what stage are they?

Prior to first court date [ ] First court date [ ] Case Conference [ ]

Settlement Conference [ ] Trial Management Conference [ ] Motion [ ]

Next court date (if any) \_\_\_\_\_

Other party's name \_\_\_\_\_

Address: \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone \_\_\_\_\_ email \_\_\_\_\_

Lawyer's name \_\_\_\_\_

Children from this relationship:

Name	Date of Birth	Sex	Living with
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other children:

Name

Date of Birth

Sex

Living with

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Is there any C.A.S. involvement with any of your children? Yes [ ] No [ ]

Are there any court there issued restraining orders in effect against you? Yes [ ] No [ ]  
your ex-partner/spouse? Yes [ ] No [ ]

Is there a police file? Yes [ ] No [ ]

Are there any disabilities you wish us to know about? Yes [ ] No [ ]

If so, please give details\_\_\_\_\_

Issues you would like to discuss in mediation:

\_\_\_\_ Decision making for children/children's residence    \_\_\_\_ Access    \_\_\_\_ Child Support  
\_\_\_\_ Property    \_\_\_\_ Spousal Support    \_\_\_\_ Other

Referred by: [ ] Self [ ] Counsel [ ] Advice/Duty Counsel [ ] Court Staff

[ ] Judge [ ] IRC [ ] 1<sup>st</sup> Appearance Clerk [ ] On-site Mediator [ ] Other

## Non-Disclosure Agreement

I, \_\_\_\_\_ agree/acknowledge:  
(Print Name)

Any and all information gathered in private conversations with the mediator, mediation interns and any observers (including intake interviews) is confidential except for situations where the mediator is ordered or required (e.g. information about a potential child protection issue) by law to disclose this information or where the disclosure of information suggests an actual or potential threat to human life or safety.

Should mediation proceed it shall be without prejudice meaning that any information disclosed of which I was previously unaware is inadmissible in any proceedings against the other party(ies) and that it cannot be disclosed to an arbitrator, tribunal or judge.

I will not issue a summons for KWmediation, the mediator, mediation interns and/or any observers to appear in any proceeding against the other party(ies) to disclose to an arbitrator, tribunal or judge any information, obtained from the other party(ies) in mediation intake, mediation , or private conversation, nor will I attempt to make KWmediation, the mediator, mediation interns and/or any observers disclose to me or anyone on my behalf any such information. Should I obtain this or any inadmissible information (see paragraph #2) by any other means it may still not be used in any proceedings.

I will not issue a summons for the mediation records for any such proceedings.

I acknowledge that I have been strongly advised to seek independent legal advice on all matters in dispute and that this legal advice is important in understanding my rights and responsibilities.

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Signature

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Date

### **IMPORTANT**

If you have any concerns about signing this form, if you do not understand what it means, or should you be concerned about any potential consequences of signing we urge you to get legal advice before doing so.

All parties must return signed copies of this form along with their applications for mediation in order for mediation to proceed.

Please send the completed form with proof of your income by email to [kwmediation@gmail.com](mailto:kwmediation@gmail.com) or by fax (613) 237-9959, or bring the completed application form to the Family Law Information Centre, Ottawa Court House located at 161 Elgin Street, 2<sup>nd</sup> Floor, Ottawa, or The Family Law Information Centre, L'Orignal Court House located at 59 Court Street, 2<sup>nd</sup> Floor, L'Orignal, or the Cornwall Court House 29 Second Street West, Cornwall