



Separation/Divorce Mediation CLIENT INTAKE FORM

*Please complete and return this form to Linda Yankowsky
linda@dscnc.org*

Personal Information:

Full Name: _____
Address: _____
City _____ County _____ State _____ Zip _____
Phone (home): _____ (work): _____ (cell): _____
Email: _____ Fax: _____
Gender Identity: _____ Race/Ethnicity: _____ Age: _____

Partner/Spouse's full name: _____

Please check as applicable, and write the date of your:

☐ Marriage _____ ☐ Commitment Ceremony _____
☐ Civil-Union _____ ☐ Partnership _____

Date you moved into the same residence: _____

If you are **NOT** living in the same household, please give date of: _____ Separation _____ Divorce _____

Children from this relationship:

<u>Full Name</u>	<u>Date of Birth</u>	<u>Living with</u>	<u>Relationship to you</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Demographic and Employment Information

Please list:

Employer and job title: _____

Employed since: _____ Highest level of education completed: _____

Salary (gross annual): _____

Previous marriages/civil union/children from relationship:

<u>Name of spouse/partner</u>	<u>Year relationship ended</u>	<u>Name/age of child</u>	<u>Living with</u>
_____	_____	_____	_____

Are you interested in reconciliation? If so, mediation is likely not an appropriate process for you. _____

Please check the topics that you would like to discuss in mediation:

Co-Parenting/Custody Decisions

- ☐ Schedule for each parent's time with the children. _____
- ☐ Making decisions regarding the children. _____
- ☐ Financial support for children. _____

Property Division

- ☐ Personal property (clothes, books, music, etc.). _____
- ☐ Property valued over \$500 (vehicles, art, houses, land, etc.). _____
- ☐ Financial accounts (checking, savings, stocks, bonds, etc.). _____
- ☐ Pensions. _____
- ☐ Private businesses. _____

Spouse/Partner Support

- ☐ Spouse/partner support

Other

- ☐ Please describe other topics you would like to discuss which do not fit into the above categories:

Mediation evaluation

I understand that I will be asked to fill out post mediation evaluations regardless of the outcome of mediation. Evaluations will be kept confidential. Dispute Settlement Center (DSC) is collecting this information to better serve marital/partnership dissolution clients. Surveys will be emailed to all clients, post mediation.

(Date)

(Signature)