

FILE NO. _____

Assigned Judge: _____

| |
|----------------------|
| _____, Plaintiff, |
| v. |
| _____, Defendant. |

CUSTODY MEDIATION COVER SHEET

1. Have the parties previously attended a group orientation? YES NO
2. Have the parties previously attended custody/visitation mediation? YES NO
3. Is there a pending or resolved civil or criminal domestic violence case involving the same parties in North Carolina or any other State? YES NO
If yes, you must attach a copy of all civil or criminal domestic violence restraining orders.
4. Do either of the parties need an interpreter to be present at the group orientation and/or mediation session? YES NO
If yes, what language(s) does the party speak? _____

Instructions: please COMPLETELY fill out the contact information for both parties and attorneys

| | |
|--|--|
| Plaintiff's Address: | Defendant's Address: |
| Plaintiff's Telephone Number (optional): | Defendant's Telephone Number (optional): |
| Plaintiff's Email Address (optional): | Defendant's Email Address (optional): |
| Attorney for Plaintiff's Name and Address: | Attorney for Defendant's Name and Address: |
| Attorney for Plaintiff's Telephone Number: | Attorney for Defendant's Telephone Number: |

Date: _____

- | | |
|---|---|
| <input type="checkbox"/> Plaintiff | <input type="checkbox"/> Defendant |
| <input type="checkbox"/> Attorney for Plaintiff | <input type="checkbox"/> Attorney for Defendant |

CUSTODY MEDIATION/FAMILY COURT OFFICE USE ONLY

| | |
|-------------------|-----------------|
| Orientation Date: | Mediation Date: |
|-------------------|-----------------|