

4. Has there been any recent physical violence, threats or intimidation from the other party? **Yes** **No**

If yes.....

5. Are you able to speak to the other party without feeling fearful or intimidated? **Yes** **No**

6. Is there a current Apprehended Violence Order (AVO) in relation to you or the children? **Yes** **No**

If yes, at which Court was the order made?
 Please send us a copy of the AVO by email or fax.

7. Has there been an AVO previously? **Yes** **No**

If yes, how long ago?.....

Part C – Type of Conference

8. What type of conference would you prefer?

- 9. Zoom
- Face to face
- Shuttle (Parties in separate rooms or venues)

Part D – Child Abuse

10. Is there any current child welfare authority involvement? eg. Department of Community Services (DOCS). **Yes** **No**

If yes, please give details: Case worker's name:.....

DOCS office:..... Phone:.....

Details of involvement:.....

Please attach additional page if you require more room

11. Has there been any past involvement with a child welfare authority? **Yes** **No**

If yes, please give details:.....

12. Do you have any concerns about your child/ren's safety or wellbeing when they are with the other party/ies? **Yes** **No**

If yes, please give details:.....

.....

Part E – Health

Health issues like depression, post-natal depression, anxiety, grief extreme emotional distress or upset can make it difficult to participate in a conference on an equal footing.

13. Are there any health issues that may affect your ability to fully participate in a conference? **Yes** **No**

If yes, please give details:.....

14. Are you aware of any health issues that may affect the ability of the other party/ies in a conference? **Yes** **No**

If yes, please give details:.....

Difficulty with concentration, staying focused, understanding lots of information and taking medication (including alcohol, methadone and other drugs) can also affect your ability to participate in a conference.

15. Is there anything of this nature that may affect the ability to participate? **Yes** **No**

If yes, please give details:.....

16. Is there anything of this nature that may affect the ability of the other party/ies to participate? **Yes** **No**

If yes, please give details:.....

Part F – General Information

17. Do you have any special needs relevant to the conference? eg. Interpreter/support worker/disability requirements? If you need an interpreter, state what language and dialect. **Yes** **No**

If yes, please give details:.....

Part G – Legal Proceedings

18. Are there any current orders/ parenting plans/ written agreements? **Yes** **No**

If yes, please send us a copy of the order by email or fax.

19. Have legal proceedings been commenced in relation to the family law issues? **Yes** **No**

If Yes, complete section 2.
If No, go to the end of the form (Certification)

SECTION 2 – To be completed ONLY if the matter is in Court

Part H – Matter Details

20. If there an Independent Children's Lawyer involved in the matter? **Yes** **No**

If Yes, what is the lawyer's name?.....

21. If applicable, when did you relationship with the other party begin?

When did you separate?.....

22. When is the next Court date?.....

23. What is the matter listed for at Court?.....How many days?.....

24. Is there a report by a Family Consultant or other expert? **Yes** **No**

If yes, please send us a copy of the order by email with this form

25. If there is no existing expert report, has one been ordered by the Court? **Yes** **No**

If yes, when will it be released?.....

26. How much time does the child/ren currently spend with each parent or other party?

27. What order do you seek or what would you like to change about these arrangements?

28. Why do you think the orders you seek are better for the children?

29. Do the children have any regular out of school activities (eg. social, hobby, sport)? **YesNo**

If yes, please give details:.....

30. Additional information:.....

CERTIFICATION

Parties please complete (Part 1)

Lawyers please complete (Part 2)

Part 1

I certify that this information is true to the best of my knowledge

<i>Your signature</i>	<i>Date</i>	<i>Phone No.</i>
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Part 2

Lawyer's certification and signature (required if lawyer has completed this form)

Do you consent to the disclosure of your business contact details to the other party or their lawyer? **Yes No**

I certify that I have consulted with above-named client and considered all the questions on this checklist. I consider that my client's matter is suitable for family dispute resolution. I will retain a completed copy of this intake/screening sheet signed by myself on my file.

Name (Block Letters)	Signed by Lawyer	Date
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SUMMARY OF ASSETS & LIABILITIES

ASSETS	Value \$	In whose possession? Wife/Husband
Real Estate - <i>write address</i>		
Real Estate – <i>write address</i>		
Bank Accounts – <i>write account number and bank</i>		
Bank Accounts – <i>write bank</i>		
Motor Vehicle – <i>write make, model and year</i>		
Motor Vehicle – <i>write make, model and year</i>		
Shares – <i>write number held and company</i>		
Cryptocurrency and etherium – <i>write current value and name of hot or cold wallet where the currency is held</i>		
Non-fungible tokens – <i>provide details and name of hot or cold wallet where it is held or other location</i>		
Interest in business – <i>write name of business</i>		
Superannuation – <i>write name of fund</i>		
Superannuation – <i>write name of fund</i>		
Interest in a deceased estate – <i>name of estate</i>		
Other assets		
TOTAL ASSETS	\$	

Prior to the mediation – To Do List

1. Obtain 3 market appraisals / valuations for each piece of real estate that you own;
2. Obtain a valuation for each motor vehicle you own or have control of;
3. Obtain up to date financial statements for each company or family trust that you own or have control of;
4. Obtain up to date superannuation statements;
5. Obtain a transaction list for each hot or cold wallet that you hold cryptocurrency or non-fungible tokens;
6. Provide financial disclosure to the other party at least 14 days prior to the mediation so that you both are aware of what the property pool is that you will be discussing;
7. Bring a copy of all disclosure documents to the Mediation for the Mediator.

STANFORDS SOLICITORS & MEDIATORS | CONFIDENTIALITY AGREEMENT

1. This is a conference to assist people to reach an agreement about matters that they have not yet been able to resolve.
2. I will do my best to use this conference as a genuine attempt to reach an agreement.
- 3) I understand it is very important that we feel we can talk freely in the conference. As a result of this, I agree that:
 - a) I will not record the mediation, either via audio or video
 - b) What is said at this conference will always be private and confidential.
 - c) I will not disclose to anyone, anything said or done during the conference, or any information that I receive during the conference, except:
 - any party may discuss the content of any agreement reached or proposal made at the conference with any person who is likely to be directly affected by that agreement or proposal if it takes effect; and
 - information may be disclosed which all parties agree may be disclosed; and
 - the written record of any agreement reached at the conference may be disclosed for the purpose of having orders made in accordance with that agreement.
 - d) Evidence of anything said or done in the conference cannot be given in any legal or other proceedings at any time.
- 4) I agree that when I use the words “anything said or done” and “information that I receive” I am including:
 - a) anything said or done whilst anyone at the conference is talking about the dispute;
 - b) the willingness of anyone at the conference to consider any settlement proposal; or
 - c) any information prepared for the conference
- 5) I will not seek to require the chairperson or anyone employed by Aspire Mediation to give evidence in any legal proceedings of anything whatsoever regarding this dispute.
- 6) I understand that in some situations, the chairperson may require or authorise the disclosure of things said or done, or information received, during the conference. Some of the reasons are:
 - a) to protect the life or health of any person or to protect property;
 - b) where each of the parties agree that this should happen;
 - c) where the party from whom the information was received agrees to its disclosure;
 - d) that it relates to some illegal act or to improper conduct by a lawyer or other professional person; or
 - e) to obey a court order or other law.
 - f) to investigate a complaint

Your Signature	Your name	Role:	Signature of witness	Date
		Party		
		Lawyer		
		Party		
		Lawyer		
		FDRP		