

Grant file number (24Fxxxxxx)

Mediation Intake & Assessment CHECKLIST

Family Dispute Resolution Service Email: fdr.checklist@legalaid.nsw.gov.au

This checklist - for all parties - will help us decide whether mediation is suitable and safe.

If the party has a lawyer, this checklist is to be completed by the lawyer in consultation with their client.

We will provide a copy of the completed checklist to the Mediator, but we will not give it to any other party.

Please email the completed checklist and any attachments to fdr.checklist@legalaid.nsw.gov.au

OR DR number (DR-2024xxxxxxx)

Name									
Email									
Phone									
Date of birth									
What is your relatio	nship to the child	d/ren in this matte	r?						
What are the name	es and dates of b	oirth of the childre	n, and v	who do t	hev live w	ith?			
Nam	-	Date of Birth			Living with				
Part A - Family Dis									
1. Have you attend			ation in t	he past 1	2 months?	?		Yes	No
If yes, at which organisation?									
Did you receive a certificate saying you attended?					Yes	No			
If so, wh	at type? (S60i or 0	CDR) Section60i	Α	В	С	D	E	or	CDR
2. What issues would	d you like to discu	ıss at the mediatic	n?						
Live with	Spend time	with Re	location	1	Property	y		Othe	r
Part B - Format of n	nediation - Legal	Aid conducts me	ediation	s via Zoo	m				
What format would									
Parties can see of	-	Shuttle - Partie	s canno	t see one	another		Zoom -	- audio	o only
Comments									,
3. Do you have acc	cess to the interne	et\$						Υe	es No

Make sure your phone or device is fully charged before the mediation

Phone back-up

Please provide your best contact number so the mediator can call you during the mediation if they need to.

Party's number Solicitor's number

Part C - Matter Details

4. Are there any current orders/parenting plans/written agreements?

Yes No

If yes, please attach a copy

5. Were you and the other party married, or did you live together?

Yes No

If yes, when did your marriage or live-in relationship begin?

When did you separate?

6. How much time does the child/children spend with each party or parent?

What would you like to change about the current arrangements?

Please provide any additional information - eg about the special needs of the children

7. Have legal proceedings commenced?

Yes No

No

If no, please go to Part D

8. Is there an Independent Children's Lawyer?

Yes

If yes, what is their name?

9. When is the matter next in court?

For how many days?

Yes

What is it listed for?

10. Is there a report by a Family Consultant or other expert?

Yes No

If yes, please attach a copy

11. If there is no existing expert report, has one been ordered by the Court?

Yes No

If yes, when will it be released?

Part D - Aboriginality

12. Do you identify as an Abor	riainai person	ç
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Yes No

No

13. Do you identify as a Torres Strait Islander person?

Yes

14. If you are Aboriginal or Torres Strait Islander person, would you prefer an Aboriginal/Torres Strait Islander mediator if available?

No Don't mind

15. Does the other party or children identify as Aboriginal?

Yes No

16. Does the other party or children identify as Torres Strait Islander?

Yes No

Part E - Cultural Information **Cultural Identity** 17. Do you identify with a cultural and/or religious background? Yes No If yes, provide details 18. Would you prefer a mediator from your own cultural or religious background if available? Yes No Don't mind Interpreting and Translation Yes No 19. Do you need an interpreter? If yes, what language/dialect? 20. Would you prefer a male or female interpreter? Male Female Don't mind 21. Does the other party need an interpreter or translated information? (eg. letters) Yes No If yes, what language/dialect? Part F - Domestic and Family Violence 22. Are there allegations of physical, verbal or emotional abuse between the parties? Yes No 23. If yes, are you the victim? Yes No 24. Has there been any recent threat, physical violence or intimidation? Yes No If yes, please tell us what happened 25. Can you speak freely to the other party without feeling scared or intimidated? Yes No 26. Are you worried about your safety during a mediation? Yes No 27. Are you worried about your safety or your child's safety as a consequence of Yes No attending mediation? Yes No 28. Is there a current AVO? If yes, please attach a copy of the AVO 29. Was there a previous AVO? Yes No If yes, how long ago? 30. Has there ever been a breach of AVO? Yes No

Part G - Welfare of the Children

31. Do you have any concerns about your children's wellbeing when they are with the other party/ies?

Yes No

If yes, please provide details

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DCJ	invo	ivemer	1

32. Is there any current involvement with Dept of Communities & Justice? (Prev DoCs/FaCS) Yes

If yes, please advise which DCJ office and the current status

Caseworker's name

33. Has there been any past involvement with DCJ? *If yes, please provide details*

Yes No

No

34. Do you consent to Legal Aid NSW approaching DCJ to obtain information for the purpose of the mediation?

Yes No

Part H - Accessibility needs

35. Do you need anything put in place to assist you on the day of the mediation?

Yes No

This could include:

- · A support person attending mediation with you (please note that any request for a support person must be sent to the mediation organiser and approved by Legal Aid NSW before the mediation date)
- · Regular breaks during the mediation
- · Minimal background noise

Please provide details

Other Party Details

Other Party's Name

Email Address

Phone number/s

Address

*We will contact all parties in the matter to invite them to the mediation and help us assess the suitability of the mediation. Please let us know if you have any concerns for your safety or your client's safety if we contact any party.

Any Further Details

CERTIFICATION - if the party has a lawyer, the lawyer must certify suitability for mediation.

Completed by (name) on (date)

I am a party I am a lawyer I am a mediation organiser

Lawyers

I have taken instructions from my client
 I believe this matter is suitable for family dispute resolution
 I consent to Legal Aid providing my contact details to the other party's lawyer
 Yes No

NOTE: In children and property matters:

I am aware my contact details will be shared with the other party's lawyer so that financial information can be exchanged