

# PRO SE MEDIATION REFERRAL FORM

This form is for self-represented parties in domestic cases (divorce, legitimation, custody, visitation, child support, etc.). You may use this form if you are the Plaintiff or Defendant. **It is your responsibility pursuant to Court Order to make sure the mediation is scheduled and takes place prior to your final hearing (contact the mediation office for timing requirements).** If it does not occur within enough time before your final hearing, your hearing may be postponed.

**Please Complete the Following Information:** Today's Date \_\_\_\_\_

Next Court Date \_\_\_\_\_ Judge \_\_\_\_\_ County \_\_\_\_\_

Case # \_\_\_\_\_ (top right corner of your legal papers)

## PLAINTIFF

Name \_\_\_\_\_ Personal Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Attorney (if represented) \_\_\_\_\_ Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address of Attorney \_\_\_\_\_

## DEFENDANT

Name \_\_\_\_\_ Personal Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Attorney (if represented) \_\_\_\_\_ Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address of Attorney \_\_\_\_\_

**TYPE OF ADR REQUESTED: MEDIATION**

**CASE TYPE: DOMESTIC**

**TYPE OF DOMESTIC CASE (please specify):** \_\_\_\_\_ DIVORCE \_\_\_\_\_ LEGITIMATION

\_\_\_\_\_ MODIFICATION

\_\_\_ CUSTODY \_\_\_ VISITATION \_\_\_ CHILD SUPPORT \_\_\_ PROPERTY \_\_\_ ALIMONY \_\_\_ DEBTS

OTHER COMMENTS (specify) \_\_\_\_\_

**HAVE THERE BEEN ANY ALLEGATIONS OF DOMESTIC VIOLENCE:** \_\_\_\_\_

Yes No Unknown

\*\*\*\*Mail or fax the form to:

NINTH JUDICIAL ADMINISTRATIVE DISTRICT  
OFFICE OF DISPUTE RESOLUTION  
311 Jesse Jewell Parkway, Suite 104  
Gainesville, GA 30501  
Phone: 770.535.6909 / Fax: 770.531.4072  
www.adr9.com