Mediation Client Intake Questionnaire

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** |  | **File Reference** |  |
| Full legal name |  |
| Preferred name |  | Date of Birth |  |
| Residential Address |  | Postal Address if different.  |
| Employer (if relevant)  |  |
| Home Telephone |  | Mobile |  |
| Work Telephone |  |
| Preferred Email  |  |
| Is the address, phone numbers or email address confidential? |

**Will another party who has an interest in your dispute be attending with you?**

|  |  |
| --- | --- |
| Full legal name |  |
| Preferred name |  |
| Mobile Phone |  | Alternative Phone Numbers |
| Email Address |  |
| Postal Address |  |
| Relationship to you  |  |

**Would you like a support person to participate in the mediation?***A support person is someone who has no interest in the dispute*

|  |  |
| --- | --- |
| Name |  |
| Occupation |  |
| Mobile Phone |  | Alternative Phone Numbers |
| Email Address |  |
| Postal Address |  |
| Role  |  |

**Key Contact for the other Party**

|  |  |
| --- | --- |
| Name |  |
| Postal Address |  |
| Home Telephone |  | Mobile |  |
| Work Telephone |  |
| Email  |  |

**Please list any other parties with an interest in the dispute that you feel should be involved in the mediation**

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| --- |
|  |

**Do you have any special needs?**

* **Interpreter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (language)**
* **Disabilities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are there any special cultural considerations the mediator needs to be aware of?**

* **I am an Aboriginal or Torres Strait Islander person**
* **Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Section 1 – History of the Dispute

Briefly describe the dispute e.g how long has it been going on, what are the main issues, the roles of the principle people involved

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|  |

What previous efforts have been made to resolve this dispute?

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| --- |
|  |

|  |  |
| --- | --- |
| Have you participated in Mediation in relation to this dispute in the past?  | * Yes
* No
 |
| Is there an Intervention Order / Bail Conditions / Court Orders in place in relation to any person involved in this discussion? If yes provide details and attach a copy of the orders | * Yes
* No
 |
| * What are the main reasons for requesting / agreeing to mediation?
 |
| * What are the main outcomes you’d like to achieve?
 |

# Section 2 – Personal Safety

|  |  |
| --- | --- |
| * Was there a history of physical, verbal or emotional abuse in this situation?
 | * Yes
* No
 |
| * Has there been any physical violence, threats or intimidation from the other party?
 | * Yes
* No
 |
| * Have you used physical violence, threats or intimidation against the other party?
 | * Yes
* No
 |
| * Do you have any concerns about being in the same room as the person you wish to mediate with?
 | * Yes
* No
 |

Have you had legal advice in relation to this dispute?

|  |  |  |  |
| --- | --- | --- | --- |
| Lawyer  |  |  Phone |  |
| Firm |  | Email |  |

Are there any legal proceedings underway in relation to this dispute?

|  |
| --- |
|  |

Is there anything else that you believe the mediator needs to know before your Pre-Mediation session?

e.g additional information, your availability, best contact times etc

|  |
| --- |
|  |

Yours Sincerely,

Craig Anderson

Owner Mediate-Me,

NMAS Nationally Accredited Mediator.

Bach. Elec. Eng. M. Min.Lead.