VOA Dispute Resolution Center

Family Mediation Application Form

As an alternative to living with the stress of conflict or the anxiety of the formal legal system, mediation can help people in conflict find workable solutions quickly and cheaply. Using a voluntary and confidential process, neutral mediators help parties in conflict reach a mutually satisfying agreement. Mediators assist parties in communicating with each other and encourage everyone to collaboratively problem solve a resolution that meets everyone’s needs.

During the mediation session, the mediators will begin with opening remarks that provide an overview and orientation to mediation. They will then ask each of you to provide a brief summary of the issues you want to resolve and help the two of you create a list of these items. After the list has been created, they will help the two of you negotiate and discuss possible solutions. Finally, if there are agreements the two of you want in writing, the mediators will help you capture those agreements on a settlement form.

To start the process, we require a completed Mediation Application form, as well as a $75 non-refundable case opening fee. Our process typically takes between one and two months, with the length of the process primarily depending on the cooperation of both parties. Our fee in total for one session of mediation is $600, which we split 50/50 between both parties, unless otherwise indicated on a parenting plan, or court document. Fees may be adjusted based on a demonstrated financial need. The application for our sliding scale is the last page of this packet.

Once we have opened the case, your case manager will be in contact with both parties to answer any questions either of you may have, collect the mediation fees, then schedule about 2-3 weeks from the time we have received payment in full from both parties.

If the other party declines mediation, or is stalling the process, a mediation scheduling report can be issued. This report indicates that you requested mediation, our last date of contact with both parties and the case outcome. If the other party has declined mediation, it would indicate he/she declined.

If you have any questions about our services or mediation in general, you can feel free to call us at (425)339-1335, or check out our website at http://www.voaww.org/Get-Help/Dispute-Resolution-Services/MediationFacilitation/I-Want-to-Schedule
In order to open a case we require:

- Completion of all asterisked (*) fields
- $75 non-refundable case opening fee

<table>
<thead>
<tr>
<th>Have you had a case for mediation through us previously?</th>
<th>Yes □</th>
<th>No □</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Your Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*ZipCode:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Phone:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*E-mail:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Other Party:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*ZipCode:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Phone:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*E-mail:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Children’s Names/Ages:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

We have a couple questions that we ask any time we are opening a case for mediation:

1. * Is this part of a divorce proceeding?
   - Yes □
   - No □

2. * Are there any restraining orders or court orders which would prohibit your ability to mediate?
   - Yes □
   - No □
   - If Yes, please attach to your return email.

3. * Are there any currently open cases for CPS?
   - Yes □
   - No □

4. * Are there any concerns about domestic violence or substance abuse?
   - Yes □
   - No □

5. * Is there a Parenting Plan currently in place?
   - Proposed □
   - Temporary □
   - Final □
   - No □
   - Please attach.
In order to open a case, we require completion on all asterisked (*) fields, as well as a $75 non-refundable case opening fee.

* Please describe your ideal outcome from mediation:

* I intend to provide my $75 non-refundable case opening fee by:

  - [ ] Credit Card over the phone (425)339-1335
  - [ ] Check in the mail VOA Dispute Resolution Center | PO Box 839, Everett WA, 98206-0839

How were you referred?

What would you consider your income status to be? Choose an item.

Annual Household Income?

What would you consider your race or ethnicity to be?

Hispanic? Yes / No

Are you currently married/ divorced/ separated or never married to the other party?

How many adults live in your household?

How many children live in your household?

Who is the custodial Parent?

Is there an open Child Support case?

What is your age range? 13-17 18-30 31-54 55-64 65+

Are you a Veteran?
**Technology Questions**

Do you have technology to participate in an online mediation, (i.e. Computer/Smart phone/Microphone/Camera/Speakers)?

Do you have access to email?

Do you have high speed internet?

Do you have the zoom app on your phone or computer?

Do you have a private space to be in during the mediation?

Has the COVID-19 crisis directly or indirectly led to the need for this mediation?

In the pre-mediation process, it is the responsibility of both parties to drive the case. If neither party has called on your case in more than two weeks, there is the possibility of your case closing without refunds. In order to make sure that your case runs its course to completion, we strongly encourage you to contact your case manager once a week.

* This form is completed to the best of my abilities.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
FEE DISCOUNT APPLICATION

Name of Applicant: ________________________ DRC Case Number: ____________

Fee Amount ________ Case worker: ________________ Phone: ___________________

Monthly, gross household income, by type:

Salary / Wages: ______________________________________________
Additional Income (ie. Rental, capital gains, trusts): ________________
Unemployment Income: __________________________________________
Child Support Income: __________________________________________
Financial Aide Income: __________________________________________
Government Assistance Income: _________________________________
SSI/Disability Income: __________________________________________
Other assistance; food stamps etc: _________________________________

How many adults in your household? ______________________
How many children in your household? _________________

Briefly describe any changes in circumstances:
_____________________________________________________________________________________
_____________________________________________________________________________________

Please send the first two pages of your most recent tax return, no schedules or worksheets needed, and any related documents that verify the above numbers; pay stubs, food stamp card, letter from a case worker, medical coupon information, bank statements, financial aid letter, unemployment records, etc. We are unable to mail back originals; send copies only. Applications will be denied if documentation is not supplied. In cases of extreme hardship, an appeal regarding this application may be submitted in writing to the Dispute Resolution Center for special consideration due to extenuating circumstances.

I certify that the information above on my income is complete and accurate. I understand that I am signing this under penalty of criminal prosecution if I knowingly give false information, which may result in assistance for which I am not eligible.

Signature: __________________________________________ Date: _______________

- FOR OFFICE USE ONLY -

Approved Amount: _______________ (Program Manager) _______________ (Date)
PO Box 839, Everett WA 98206-0839 Phone: 425-339-1335
2801 Lombard Ave, Everett WA 98201 www.voaww.org/drc Fax: 425-259-2110