WEST GEORGIA JUDICIAL CIRCUIT
ADR MEDIATION PROGRAM

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Savannah A. House, Program Director
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DOMESTIC RELATIONS INITIATION FORM

STYLE OF CASE: _____

CIVIL ACTION FILE NUMBER: _____

SUPERIOR COURT OF: _____ **COUNTY**

ASSIGNED JUDGE: _____

Name: _____

Mailing Address: _____

_____

Mobile Phone Number: _____

Email: _____

Attorney Representation: ☐ Yes ☐ No

Attorney Name: _____

Law Firm: _____

Preferred Phone Number: _____

Email: _____

Alt. Email: _____

Name: _____

Mailing Address: _____

_____

Mobile Phone Number: _____

Email: _____

Attorney Representation: ☐ Yes ☐ No

Attorney Name: _____

Law Firm: _____

Preferred Phone Number: _____

Email: _____

Alt. Email: _____

Attorneys are required to attend with their client unless the Court has granted them permission to not attend.

Are there any minor children of this marriage/relationship? ☐ Yes ☐ No
If there are children of the marriage/relationship, *all* Parties are required to complete a court-approved Parenting Education Seminar within 30 days of filing.

Have the Parties attended the Seminar and filed their Certificate of Completion with the Court?

Petitioner: ☐ Yes ☐ No
If yes, date of completion: _____ If no, date scheduled to attend: _____

Respondent: ☐ Yes ☐ No
If yes, date of completion: _____ If no, date scheduled to attend: _____

Mediation may not proceed until *all* parties have complied with the requirement of Standing Order Number Two of the West Georgia Judicial Circuit to attend an approved parenting seminar or obtain a waiver from the Court. The following link will direct you to the provider's website where the course may be completed: https://coparentingfamily.com/wp/.

1.) What type of action is this?

☐ Divorce/Annulment
☐ Family Violence
☐ Paternity/Legitimation
☐ Other:_____
☐ Modification of Final Decree
☐ Contempt
☐ Separate Maintenance

2.) What relief is sought by the parties?

☐ Custody
☐ Child Support
☐ Visitation
☐ Alimony
☐ Attorney Fees
☐ Other:_____
☐ Property Division
☐ Debt Division

3.) Have the parties exchanged Domestic Relations Financial Affidavits pursuant to USC Rule 24.2 ?

Petitioner: ☐ Yes ☐ No Respondent: ☐ Yes ☐ No

4.) Has Guardian ad litem been appointed? ☐ Yes ☐ No If yes, provide name, email address, and telephone number: _____

5.) (a) Are there any concerns about the use of mediation in this case because of any alleged domestic violence, or any type of abuse (spouse, child, substance, etc.), criminal cases pending, DFAC involvement?

☐ Yes ☐ No

(b) All parties are required to complete the Domestic Relations Screening Form: https://godr.org/adr-screening/.

6.) Are there any special circumstances which need to be taken into consideration? (i.e., physical limitations, language issues, etc.) ☐ Yes ☐ No If yes is checked, please contact the ADR office directly to discuss.

Signature: _____ **Date:** _____

Printed Name & Title: _____

***All Parties must be included on any email correspondence when submitting a Mediation Initiation Form. This ensures that all Parties are informed and may begin coordinating their availability for scheduling mediation. If any Party and/or Attorney has a preferred date, time, or location for mediation, please include that information in your email.**