

INFORMATION SHEET

CLIENT (PLAINTIFF)

Legal Name:

Maiden Name:

Will Maiden Name be restored: yes, no or unsure

Address:

Home phone:

Work phone:

Cell:

E-mail:

Date of Birth:

Social Security Number:

Level of Educational (include degrees held):

Marital History – please list number of marriages and how each marriage ended:

Names and Dates of birth of Children from previous union:

Do you have any medical problems or concerns:

Please provide a brief Employment History during the marriage/salaries/dates:

A. Employer/Occupation:

Dates:

Wages/Pay Rate:

- 1.
- 2.
- 3.
- 4.

Please list Individual Contributions that each party has made to the marital estate such as inheritances/gifts/personal injury settlements and the like:

Please list your goals for this process and your separation in general:

How did you hear about mediation?

INFORMATION SHEET

CLIENT (DEFENDANT)

Legal Name:

Maiden Name:

Will Maiden Name be restored:

Address:

Home phone:

Work phone:

Cell:

E-mail

Date of Birth:

Social Security Number:

Level of Educational (include degrees held):

Marital History – please list number of marriages and how each marriage ended:

Names and Dates of birth of Children from previous union:

Do you have any medical problems or concerns:

Please provide a brief Employment History during the marriage/salaries/dates:

	A. Employer/Occupation:	Dates:	Wages/Rate:
1.			
2.			
3.			
4.			

Please list your goals for this process and your separation in general:

Please list Individual Contributions that each party has made to the marital estate such as inheritances/gifts/personal injury settlements and the like:

How did you hear about mediation?

MARITAL AND CHILD INFORMATION

Date of Marriage:

What City and State were you married in:

Names and Dates of Birth of all Minor children:

Names and Date of Birth of all Majority aged children:

Please list any medical concerns or issues for each child, if any:

Please list the City and State of Each child's Residence from birth to present: