

ONLINE COURT MEDIATION INTAKE FORM

COURT INFORMATION

Intake

COUNTY (select one): Arlington Fairfax Loudoun Falls Church

COURT (select one): Small Claims General District

Mediation Date: / /

Court Case Number:

Dates Contacted? Plaintiff Defendant

Mediator 1: **Cert #:** **Exp. Date:** ___/___/___

Mediator 2: **Cert #:** **Exp. Date:** ___/___/___

Mentee:

TYPE (check box for type *and* type in number): *if applicable*

Observation Co-Mediation Non-Mentored Co-Mediation
 1st 2nd? 1st 2nd 3rd 4th ___?

CASE INFORMATION

Plaintiff: **Defendant:**

Company: Company:

Attorney: Attorney:

CASE TYPE (check one):

Animals/Pets Consumer/Merchant Contract/Debt Criminal/Restorative Justice
 Employment Landlord/Tenant Neighborhood Other _____

CASE OUTCOME

Hours: **Number of Parties:**

Result (circle one): **Description**

| | |
|---------------------------------------|---|
| A: Agreement | Parties reached an agreement. |
| No Agreement | Parties did not reach an agreement after mediation. |
| T: Terminated | Process deemed inappropriate by mediators. |
| W: Withdrawal | Parties did not sign Agreement to Mediate after Judge Referral. |
| Closed: No Show/Not Interested | Parties did not appear or move forward with session. |

Evaluations Completed?
 If not, please explain: _____

**Required Forms
 NVMS**

Intake Form Agreement to Mediate (Signed) Agreement (If Applicable) Evaluation Forms

NVMS STAFF USE ONLY:

NVMS Database (Check) _____ **OES-DRS INVOICE #** _____ **M.I.S. Entered**
Date: _____

