

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 (select 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 Conflict Resolution Center**

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

NVMS CRC STAFF USE ONLY:

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

