

## EARLY SETTLEMENT MEDIATION

### Record of Termination

**INITIATOR:** \_\_\_\_\_

**RESPONDENT:** \_\_\_\_\_

**COUNTY:** \_\_\_\_\_

**CASE NUMBER:** \_\_\_\_\_

A. If a mediation session was **not** held, indicate whose absence was responsible (circle):

Initiating Party

Responding Party

Both Parties

TYPE OF CASE	
Civil	
Small Claims	
Family & Divorce	
IDEA	
Guardianship	
Permanency	
Community	
Other: _____	

NATURE OF DISPUTE	
All Divorce Issues	
Child Related Issues	
Cons. Dissatisfaction	
Disturbing the Peace	
Employment	
Harassment	
Misdemeanor Assault	
Money	
Permanency	
Property	
Relationship	
Trespass	
Other: _____	

STAGE MEDIATION ENDED	
(CHECK ONLY ONE)	
Introduction	
Information Exchange	
Negotiations	
Partial Agreement	
Agreement	

RELATIONSHIP OF PARTIES	
Acquaintances	
Business/Consumer	
Coworker	
Debtor/Creditor	
Employer/Employee	
Ex-Mates	
Family	
Former Spouses	
Grandparents	
Landlord/Tenant	
Mates	
Merchant/Merchant	
Neighbors	
Real Estate	
Spouses	
Stranger	
Unmarried Parents	
Victim/Adult Offender	
Victim/Juvenile Offender	
Other: _____	

NUMBER OF PARTICIPANTS	
Parties	
Attorney (s)	
Mediator (s)	
Others: _____	
<b>TOTAL # PRESENT</b>	

TIME INVOLVED	
(ROUND TIME OFF TO NEAREST 1/2 HOUR)	

Travel/Wait Time	
Mediator # 1	
Mediator # 2	

Screening Time (If applicable)	
Mediator # 1	
Mediator # 2	

Mediation Time	
Mediator # 1	
Mediator # 2	

Number of Sessions	

TOTAL TIME (HOURS)	

**If a referral to another agency is indicated, what do you advise?**

\_\_\_\_\_

**How was the relationship improved?**

\_\_\_\_\_

\_\_\_\_\_

**Recommendations/Remarks:** \_\_\_\_\_

(Please PRINT Name)

**Mediator #1:** \_\_\_\_\_

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**Date:** \_\_\_\_\_

PLEASE COMPLETE & RETURN THIS FORM WITH  
THE CASE PAPERWORK TO THE EARLY  
SETTLEMENT PROGRAM OFFICE

*Thank You!*

(Please PRINT Name)

**Mediator #2:** \_\_\_\_\_

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**Date:** \_\_\_\_\_