

FORM 50—ORANGE COUNTY
INFORMATION FOR SCHEDULING MEDIATION PRIOR TO TRIAL SETTING

Date: _____ Case No: _____ Div.: _____

TYPE OF CASE: Divorce Paternity Modification Temporary Other (specify): _____

If applicable: **Coordinated Mediation:** Date: _____ Time: _____ Mediator: _____

PETITIONER: _____ **RESPONDENT:** _____

(Please circle) Mr. Mrs. Ms.

(Please circle) Mr. Mrs. Ms.

ANNUAL GROSS INCOME: _____

ANNUAL GROSS INCOME: _____

CERTIFIED AS INDIGENT: Yes No

CERTIFIED AS INDIGENT: Yes No

ATTORNEY (if you are represented): _____

ATTORNEY (if you are represented): _____

ADDRESS (Attorney's address if you are represented):

ADDRESS (Attorney's address if you are represented):

TELEPHONE #: _____

TELEPHONE #: _____

E-MAIL: _____

E-MAIL: _____

G.A.L. (if any): _____ Address: _____ Telephone # _____

**Please check the issues that are included in the
 Petition/Modification to be mediated:**

- Parental Responsibility Time Sharing Child Support Exclusive Possession of Home
 Equitable Distribution (assets/debts) Attorneys fees Alimony/Spousal Support
 Other: _____

Have you ever been involved with any other family case with this party? Yes or No Case Number: _____

State or County Origin: _____ If Orange County case, list case number: _____

The mediation should generally be conducted within 30-45 days unless extended by agreement of parties. You may call the mediation office at: **(407) 836-2004** to obtain a date and time for mediation.

You may also check the website for available dates at <https://www.ninthcircuit.org/mediation/MedsAvail.htm>

You can submit this Form 50 by:

(1) Email: OrangecountyDRS@ocnjcc.org

(2) Mail it in to: Dispute Resolution Services, 105 E. Robinson Street, Orlando, FL 32801

Person submitting the Form 50: _____
Print Name Signature