

MEDIATION QUESTIONNAIRE

(Fill out and submit at least two (2) business days before your mediation.)
Use supplemental sheets if necessary

Name: _____

Home Address: _____

Mailing Address: _____

Is your address restricted by Court Order? Yes No

Is your phone number restricted by Court Order? Yes No

Home Phone: _____ Cell Phone: _____

Message Phone: _____ Other Phone: _____

Email: _____

Place of Employment: _____

Address: _____

Work Phone: _____

1. Your child(ren's) names, ages and date of birth involved in this custody plan:

Child's Name	Age	Date of Birth

2. The date you and the other parent separated (actually began living in different households).

3. How are you and the other parent communicating with each other? _____

4. In what areas do you and the other parent disagree about your child(ren)?

5. Is there a current court ordered Custody Plan? Yes (provide copy) No

6. What custody/time-share plan have you followed since your separation?

7a. Do you have any immediate plans to relocate (move from where you are living)?

Yes. Where: _____ When: _____

No

7b. Does the other parent know about your plans of moving? Yes No

8. How would you describe yourself as a parent? _____

9. How would you describe the other parent as a parent? _____

10. How have your children reacted to your separation/custody dispute? _____

11. Do you have any concerns about the safety and well-being for yourself and/or your child(ren)?

Yes No

12. Have you discussed these concerns with the other parent?

Yes No

If yes, please describe: _____

13a. Is there a current Order of Protection? Yes (provide copy) No

13b. Has there ever been an Order of Protection in place? Yes No

14. Is there anything else you think I should know about you, the other parent, or each other's family? If so, please describe: _____

15. What would you like to see as an outcome of mediation? _____

16. New Mexico law assumes joint legal custody is in the best interest of the child(ren). Joint legal custody involves both parents making joint decisions regarding the child(ren)'s city of residence, religion, education, medical care and recreational activities. Do you have any concerns about sharing joint legal custody with the other parent? Yes No

If yes, please describe: _____



Court Mediation Website
<https://thirddistrict.nmcourts.gov/services-programs/domestic-remediation-divorce/>

STATUS QUO – WHAT WE HAVE NOW:

(CHILD'S) (CHILDREN'S) NAME:				
RESIDENCE: City & County				
RELIGION:				
DOCTOR -				
Name:				
Address:				
Phone:				
DENTIST -				
Name:				
Address:				
Phone:				
SCHOOL -				
Name:				
Address:				
Phone:				
CHILD CARE -				
Name:				
Address:				
Phone:				
RECREATION - (Activities & Schedule)				
SPECIAL NEEDS (medical, physical, educational, any medications)				
OTHER:				