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| Colour Legal Aid logo | **Independent Children’s Lawyer****Intake & Assessment Checklist** |  **Family Dispute Resolution Service** **Email:** **fdr.checklist@legalaid.nsw.gov.au** |

**We will provide a copy of the completed checklist to the mediator, but we will not give it to any other party.**

**The information you provide will help us decide if mediation is suitable and safe for the parties in this matter.**

**Please email the completed form and any attachments to:** **fdr.checklist@legalaid.nsw.gov.au**

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| **Grant file no. (20Fxxxxxx)**  |  | **Or DR No. (DR20xxxxxxxx)** |  |
|  |  |  |  |
| **Child's name** |  |

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| 1. Name of Independent Children's Lawyer |  |
| 2. What are the names and contact details of the parties who should be invited to the mediation? |
|  | ***Please provide their lawyer's details if known.*** |

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| **Party type****(M,F, sol for M etc)** | **Name** | **Phone** | **Email** |
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3. What are the names and dates of birth of the children, and who do they live with?

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| **Name** | **Date of birth** | **Living with** |
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| 4. When is the matter next in Court?  |  |
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| 5. What is it listed for?  |  |
|  |
|  | For how many days?  |  |
|  |  |  |
| 6. Has a notice of child abuse or family violence been filed in this matter? |  |
|  |  |
| 7. Is DCJ involved in this matter?  |  |
|  |  |
| 8. Is there a current AVO between the parties? |  |
|  |  |
| 9. Is there a family, expert or other report? |  |
| ***If yes, please attach a copy*** |  |
| 10. If there is no existing expert report, has one been ordered by the Court? |  |
|  |  |
|  ***If yes, when will the report be released?*** |  |
|  |  |
| 11. Are there current orders? |  |
| ***If yes, please attach a copy*** |  |
|  |  |
| 12. Do any of the parties or children identify as Aboriginal?  |  |
| 13. Do any of the parties or children identify as Torres Strait Islander?  |  |
| 14. Is the matter in the Indigenous list?  |  |
|  |  |
| ***If yes, please give details*** |  |
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| **Legal Aid NSW is now conducting most mediations online via Zoom.****Please contact the mediation organiser if you have any concerns about these parties participating in online mediation.** |
| **Mediation type -** Online via Zoom |
|  |
| Comments |  |
|  |
|  |  |
| 15. What issues do you wish to discuss at the mediation? |  |
|  |
| 16. Are there issues of particular concern? |  |
| ***If yes, please give details*** |
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| **CERTIFICATION OF ICL** |  |  |
| I certify that the information I have provided is true to the best of my knowledge. |
| Name |  | Date |  |
|  |  |  |  |
| *I believe this matter is suitable for family dispute resolution:* |  |
|  |  |  |  |