

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

Grant file number (25Fxxxxxx)

or DR number (DR-2025xxxxxx)

Client's name

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

Party's role (M,F, sol for M etc)	Name	Phone	Email

3. What are the names and dates of birth of the children, and who do they live with?

Name	Gender	Date of birth	Living with

4. When is the matter next in Court?

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? Yes No

7. Is DCJ involved in this matter? Yes No

8. Is there a current AVO between the parties? Yes No

9. Is there a family, expert or other report? Yes No

If yes, please attach a copy

10. If there is no existing expert report, has one been ordered by the Court? Yes No

If yes, when will the report be released?

- | | | |
|--|-----|----|
| 11. Are there current orders? | Yes | No |
| <i>If yes, please attach a copy</i> | | |
| 12. Are any of the parties or children Aboriginal? | Yes | No |
| 13. Are any of the parties or children Torres Strait Islander? | Yes | No |
| 14. Is the matter in the Indigenous list? | Yes | No |
| <i>If yes, please give details</i> | | |

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

Parties can see one another

Shuttle - Parties cannot see one another

Zoom - audio only

Comments

15. What issues do you wish to discuss at the mediation?

- | | | |
|---|-----|----|
| 16. Are there issues of particular concern? | Yes | No |
| <i>If yes, please give details</i> | | |

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

Yes

No