



## **REFERRAL FORM**

### **What happens next.....**

Send the attached referral form to Fountain Mediation. Please complete the form in full; we are unable to proceed without the parties' names, addresses, post-codes and contact telephone numbers.

The Referral Form is to gather the information we need to help us deal with your referral more effectively and thoroughly, and to provide the best service we can. We will gather more detailed information from you at the initial information meeting.

On receipt of a completed Referral Form:

- We will contact the other party and invite them to engage in mediation.
- If the other party is willing to engage with mediation then we will invite you both to an initial appointment (lasting between 30 minutes and 1 hour). This is called a "MIAM" (Mediation Information and Assessment Meeting). We do not routinely offer joint initial appointments as experience shows that that these rarely go ahead. If you would prefer a joint initial meeting please indicate this on the Referral Form and provide us with your reasons for the preference so that we can consider this.
- If the other party is not willing to mediate then we will notify the applicant.

If parties are legally represented we will discuss the amount of information they wish us to share with their solicitors at the first mediation session.

At the MIAM we will assess whether you qualify for public funding. If you do not then you will be charged a fee (of £100 *plus* VAT) for the MIAM appointment.

If you have any questions please do not hesitate to contact us:

Telephone: 01642 260455

Post: Fountain Mediation, Fountain Chambers, Cleveland Business Centre, 1 Watson Street, TS1 2RQ

email: [help@fountainmediation.co.uk](mailto:help@fountainmediation.co.uk)

### **Who can make a referral to mediation?**

This form can be completed by an individual alone, the participants jointly, a solicitor or any other agency. When completing the form please ensure you:

1. Give complete addresses for *both* participants.
2. Give contact telephone numbers for *both* participants.
3. Complete solicitors' details (with contact telephone numbers and references) for *both* participants where legally represented.

If either party has any disability requirements please let us know. All of our documents and letters are available in large print.

***Please note:*** Information given to us on this form and at the initial assessment meeting is ***confidential*** and will not be shared with any other party to the mediation unless you give us permission. In particular your contact details will not be disclosed. However, if matters proceed to full mediation we will ask if this completed form can be shared.

***Your Details:***

Full name	
Date of Birth	
National Insurance No.	
Home Address	
Home Telephone	
Work Address	
Work Telephone	
Mobile No	
Email	
Solicitors' Name & Firm (if any)	
Solicitors contact details (inc telephone)	

***Other person's details:***

Your Full name	
Your Date of Birth	
Your National Insurance No.	
Your Home Address	
Your Home Telephone	
Your Work Address	
Your Work Telephone	
Your Mobile No	
Your Email	
Your Solicitors' Name & Firm (if any)	
Your Solicitors contact details (inc telephone)	

Mediation is confidential. However, there are occasions when we are required to breach confidentiality either in relation to child protection, or other abuse, or breaches of the Proceeds of Crime Act 2002.

Are there any issues of protection, violence or safety which we may need to address, either in relation to you or your children?

**Yes/No**

Is there any reason why you would not wish to be in the same room as the other party/parties to mediation?

**Yes/No**

Are you aware of any potential involvement with the proceeds of crime or money laundering, however small?

**Yes/No**

**If you have answered “yes” to any of the above questions please provide details.**

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**Now please complete either section A, B or C on the following page; section D if there are relevant children and section E if you wish to discuss finances.**

**A. If you are/were married:**

Date started living together?	
Date of marriage?	
Date of separation?	
Do you think the marriage has broken down irretrievably?	
Are you seeking a permanent separation or divorce?	
Date of any decree of divorce? Nisi/Conditional or Absolute/Final	
Are you currently involved in court proceedings? If yes, what stage has been reached?	

**B. If you are/were not married:**

Date you started living together, if at all.	
If separated, date of separation.	
Do you think the relationship has broken down irretrievably?	
If you were married previously please give brief details.	

**C.If the “other party” is someone other than your (ex) partner or spouse:**

What is your relationship to the other party involved in this referral?	
What is your relationship to any relevant children listed in the form below?	
Who are the other members of your household?	

**Your reasons for coming to mediation.**

**Please tell us what you think your main objectives are likely to be in mediation. We appreciate that you will need more information about it from us, but it would help us to have some idea of what you hope to achieve with our help.**

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#### **D. Relevant children.**

If there are relevant children please complete this section, even if the children are not the subject of any dispute.

Name	D.o.B.	Age	Education	Any special needs? Y/N
Name	D.o.B.	Age	Education	Any special needs? Y/N
Name	D.o.B.	Age	Education	Any special needs? Y/N
Name	D.o.B.	Age	Education	Any special needs? Y/N
Name	D.o.B.	Age	Education	Any special needs? Y/N
Name	D.o.B.	Age	Education	Any special needs? Y/N

With whom do the children live?

#### **E. Finances**

If the mediation is to deal with finances then you will need to complete a detailed questionnaire which will be discussed with you during the mediation process. To begin with some preliminary information would be useful and will be treated in confidence.

<b>The Family Home</b>
Address:
Rented/owned? If owned: estimated present value?
<b>Employment</b>
What is your occupation?
Approximately what is your annual income (gross or net)?