

# MEDIATION PROGRAM REQUEST

PLEASE FILL IN ALL INFORMATION

## Person Requesting Mediation

Full Name :

Full Address :

Phone :

Email :

## Type of Mediation Requesting?

- ☐ Parenting Plan ( I want to create or modify existing plan )
- ☐ Community ( neighbor dispute, property damage, noise complaint, HOA Complaint, Roommate)
- ☐ Landlord Tenant ( want to meet with Landlord about issues in the home, or paying a debt)
- ☐ Parent-Teen
- ☐ School-Based  
(issue in or stemming from school, school related program, resource officer referring within the school)
- ☐ Marital/Separation  
(if divorce or separation is an active case in the court, please contact the ADR at the Circuit Court)

## Information Participant #1 (name, address, phone, email)

Full Name :

Full Address :

Phone :

Email :



Need help after hours?  
Dial 2-1-1 or dial 410-685-0525  
if you can't get through

**Information Participant #2** (name, address, phone, email)

Full Name :

Full Address :

Phone :

Email :

**Information Participant #3** (name, address, phone, email)

Full Name :

Full Address :

Phone :

Email :

**Information Participant #4** (name, address, phone, email)

Full Name :

Full Address :

Phone :

Email :

**Best Time of Day to Contact you?**

☐ Morning (9-11am)

☐ Late morning early afternoon ( 11am-1pm)

☐ Afternoon (12-3pm)

☐ Evening (3-6pm)



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