

DECLARATION & ORDER TO WAIVE REQUIRED MEDIATION

This form is provided to people referred to mediation, by order of a judge or court commissioner, who would like to be excused from mediation for one of the reasons provided by statute. You must be able to establish one of the reasons shown on the Declaration & Order Waiving Mediation form to be excused from mediation. You may use this form to make your request.

STEP 1:

FILL OUT THE DECLARATION FORM

Type or print neatly.

If you check a box that says there has been abuse, but no court case is pending, or that there has been alcohol or drug abuse, or that your health or safety would be endangered by attending a mediation session, or that to attend mediation would cause undue hardship, you must explain why. Give specific facts about what has happened to you, who did it, and when. Put in facts such as whether or not you felt pain, did not consent, and feared for your safety. Sign the document. Make three additional copies. Keep the original for yourself.

STEP 2:

FILE THE DECLARATION

File the original Declaration in the Court Commissioner Center, Room 2000, Dane County Courthouse, 215 South Hamilton Street, Madison. There will be no filing fee. If the Court Commissioner believes a hearing is necessary, both parties will be notified by the Court.

STEP 3:

MAIL THE DECLARATION

Mail one copy of the Declaration to the other party. If the Court Commissioner has a question about the other party having been notified of the Declaration, the Commissioner will ask for further information or may require that legal service be obtained.

STEP 4:

THE COMMISSIONER'S RULING

A Court Commissioner will review your Declaration. If it meets the statutory requirements, mediation will be waived. A copy of the signed order will be sent to both parties and Family Court Services by the Court.

DECLARATION FOR WAIVING MEDIATION

Petitioner / Joint Petitioner A

Case Number _____

Respondent / Joint Petitioner B

I, _____ (print name) a party in this case, say upon personal knowledge, information and belief, that:

1. A dispute regarding physical placement and/or custody has been or will be referred to Dane County Family Court Services.

2. I request a waiver of the required mediation session. The reason for this request is (check and explain all that apply):

The other party has engaged in child abuse.
There is a case involving child abuse and the case number is _____.

The other party has engaged in interspousal battery or domestic abuse.
There is a case involving domestic abuse and the case number is _____.

The other party has engaged in child abuse, interspousal battery or domestic abuse. There is no pending case, but the abuse consists of:

The other party has a significant problem with alcohol or drug abuse because:

Other evidence indicating that my health or safety will be endangered, or undue hardship caused, by attending the mediation session:

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

Signature of party filing motion

Date

Address

Telephone Number

STATE OF WISCONSIN

CIRCUIT COURT, BRANCH ____

DANE COUNTY

ORDER

Petitioner / Joint Petitioner A

Case Number _____

Respondent / Joint Petitioner B

Based upon the attached Declaration,

IT IS HEREBY ORDERED that the parties are not required to attend the private mediation session in the Dane County Family Court Services office. The parties shall attend the group session for individuals referred to that agency by court order.

Dated this ____ day of _____, 20 __ .