

**IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
LAKE COUNTY, ILLINOIS**

IN RE THE MARRIAGE PARENTAGE)
 SUPPORT ALLOCATION OF PARENTAL)
 CIVIL UNION RESPONSIBILITIES)

_____)

Case No. _____

vs.

_____)

) Previous or current OPs involving either of the parties:
))
) OP Case No: _____ County _____
) OP Case No: _____ County _____

REFERRAL TO VOLUNTEER FAMILY MEDIATION PROGRAM

1. The Volunteer Family Mediation Program is a program sponsored by the Family Division of Lake County and staffed by volunteer lawyer-mediators in the Lake County Courthouse.
2. The primary purpose of the program is to provide an opportunity for self-represented litigants to resolve their divorce/post-divorce disputes through mediation services offered by volunteer mediators. There is no charge for the mediation services.
3. A mediator is a trained neutral third party who will help the parties discuss their issues with the goal of reaching a mutually satisfactory agreement. A mediator does not provide legal advice, therapy, or marriage counseling.
4. Mediation sessions are confidential and not subject to disclosure unless the parties agree, except that allegations of child abuse, threats of physical harm or actual physical harm are not confidential.

IT IS HEREBY ORDERED AS FOLLOWS:

- A. Pursuant to Local Court Rule 4-3.19, the parties are required to submit their current dispute to mediation with the on-duty volunteer family mediator on _____ at _____ M in Courtroom C-_____.
- B. The mediator shall terminate the mediation if the parties fail to participate in good faith or if impairments to mediation exist.
- C. The parties will report directly back to their assigned courtroom at the conclusion of the mediation session.
- D. If the parties fail to reach agreement, the Court will schedule the matter for hearing.
- E. The issues to be mediated are: _____

- F. Other: _____

Dated at Waukegan, Illinois this _____ day of _____, 20____

Enter:

JUDGE

Prepared by:

Name: _____ Pro Se

Address: _____

City: _____ State: _____

Phone: _____ Zip Code: _____

ARDC #: _____

Fax: _____

E-mail address: _____