



258 Winter Street
Hyannis, MA 02601

Phone: 508-778-9559
Fax: 508-771-0135
AskSEMA.com

File No: _____

FAMILY LAW MEDIATION
INITIAL INTAKE INFORMATION
(Please Print)

Your Name: _____ Date of Birth _____

Maiden Name: _____ Resume after Divorce? _____

Present Address: Street: _____

Town/City: _____

State: _____ Zip: _____

Phone: Home: _____ Work: _____

Future Address: Street: _____

Town/City: _____

State: _____ Zip: _____

Phone: Home: _____ Work: _____

Social Security No.: _____

Employer: _____ Job Title: _____

Referred by: _____

Children:

Name	Date of Birth	Age	Living With
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How long have you been married or living together? _____

Date of marriage: _____ Number of Marriage? _____

If married, where were you married (town and state): _____

County you last lived in together: _____

Are you separated?: _____ If "yes", date of separation: _____

Do you have an attorney? _____ If "yes", name: _____



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Attorney's Address: _____

_____ Attorney's Tel. No: _____

Is there a restraining order now in effect? Yes _____ No _____

Which of you wants the separation or divorce? Husband _____ Wife _____ Both _____