

ARIZONA SUPERIOR COURT, PIMA COUNTY

REGARDING THE MATTER OF:

SUPERIOR COURT CASE NO: _____

Petitioner

and

Respondent

REQUEST FOR POST-DECREE OR POST JUDGMENT MEDIATION: NO PENDING CUSTODY AND/OR PARENTING TIME ACTION BEFORE THE COURT:

Post-Decree **Post Judgment (Paternity)**

If a Spanish-speaking mediator is required please check.
(Si necesita un mediador que habla español, favor de indicarlo aquí.)

NOTICE TO PARTY WHO DID NOT FILE THE REQUEST FOR MEDIATION

You have 20 days from the date you are served with this request to file a response. Your response must be filed with the Clerk of the Court, Arizona Superior Court, Pima County, 110 W. Congress, Tucson, AZ 85701. A copy of your response must be sent to the assigned Judge and to the party filing the request.

The Petitioner **or** Respondent states:

There is a dispute between the parties regarding custody or parenting time and the parties have agreed in writing in the most recent parenting plan or by stipulation or were ordered to seek mediation as a method of resolving disputes prior to petitioning the Court for a hearing, and the parties are not willing to voluntarily agree to attend mediation at the Conciliation Court,

AND/OR

There is an order adjudicating paternity, but no custody or parenting time orders entered in a paternity action,

AND/OR

It has been more than 1 year since the most recent court-ordered child custody/parenting plan, and there is a significant change in a parent's or child(ren)'s circumstances which would warrant a change in the existing orders, and all parties are not willing to voluntarily agree to attend mediation.

Have the parties previously participated in Mediation? yes no

If yes, state where and when: _____.

Child's name and age

Describe what you would like to accomplish in mediation. Be brief and specific. If you have a dispute, the disagreement(s) must involve the custody and/or parenting time of your minor children. Financial and enforcement issues cannot be mediated. (Attach additional pages with the case number on each if needed).

Date:

Signature of : Petitioner Respondent

OR

Attorney for: Petitioner Respondent

NAME AND ADDRESS OF THE PARTIES (PLEASE PRINT):

Petitioner's Name

Respondent's Name

Mailing Address

Mailing Address

City, State and Zip Code

City, State and Zip Code

Daytime or Message Phone

Daytime or Message Phone

Attorney for Petitioner (Please Print)

Attorney for Respondent (Please Print)

FILE THE ORIGINAL REQUEST WITH THE CLERK OF THE SUPERIOR COURT AND SERVE A COPY TO THE OTHER PARTY. FILE PROOF OF SERVICE WITH THE CLERK OF THE SUPERIOR COURT.

MAIL OR DELIVER A COPY TO:

- Conciliation Court
- Petitioner
- Respondent
- Attorney for Petitioner
- Attorney for Respondent