

Please complete <u>all sections</u> of this form electronically, then print and send by fax to (519) 679-4234

Referral Information

Date:		Referring Age	ency:			
Worker:		Telephone:			Extension:	
E-mail:		Supervisor:				
		Agency Lawy	er:			
	Mediation	Stage of		Pre-litigation		
ADR Method Requested:	Family Group Conferencing	Court		Litigation initiate	d	
i toquootou.	Aboriginal Approach	Application:		Litigation in progress		
Has this case	been screened against exclusionary crite	ria of your age	ncy?	yes	no	
Note: MCYS Policy Directive 005-06 dictates that the Office of the Children's Lawyer (OCL) must be notified when there is consideration by a CAS of resolution of issues by a prescribed method of ADR.						
Has the Office of the Children's Lawyer been contacted? yes no						
If yes, please attach a copy of the notification.						
If no, please explain:						
Have all parties consented to ADR? yes no						
If yes, please attach a copy of the consent.						
If no, explain:						
Is there a Mediator/Coordinator on the roster with whom one or more of the parties might have a conflict of interest?						
yes no Explain:						

Case Information

Family Name(s):				
Referral	Judge Counsel	Parents Band	Court Location:	
suggested by:	CAS worker/supervisor CAS lawyer	Other	Next Court Date:	

Nature of current or pending court application:	Supervision order Society wardship Crown wardship Other (define)			
Is there a concurrent Chi	Idren's Law Reform Act (CLRA) application	on? yes no unknown		
Is there a parenting capa	city assessment planned or underway?	yes no		
If yes, explain:				
Is there a matter before t	he criminal courts related to the safety of	any family member? yes no		
If yes, explain:				
Has there been a finding	that the children are in need of protection	n?		
yes, all children		no finding yet, application pending		
yes, some childre	en	CAS does not plan to seek a finding		
interim finding, w	ithout prejudice	not applicable (e.g., adoption case)		
Anticipated issues of focu	us in ADR:			
child custody and	l/or placement	Crown wardship order/review		
access to childre		adoption openness arrangement		
	of a supervision order	other(s)		
permanency plan conditions for ret	ning E urn of child to family care	Explain:		
Factors preventing dispu	te resolution through internal supports an	id services:		
severe parent/chil	d or parent/teen conflict	low parenting capacity		
high conflict betw	veen parents	addictions		
-	nflict or poor communication	other personal challenges/struggles of parent(s)		
e ()	ly opposes CAS involvement	other(s)		
lack of available local resources Explain: cultural issues				
Special Concerns: (e.g., DV, Addictions, MH issues, C&A issues, compromised cognitive abilities)				

Specific Characteristics

Please check if any of the following apply:				
Aboriginal Band:				
Band Rep/Contact #:				
essential child care needs (define)				
significant travel expenses (define)				
wheelchair/other accessibility needs (define)				
cultural consultant required Culture:				
language interpreter required Language:				
sign language interpreter required Type:				
Anticipated number of parties to attend mediation or family group conferencing:				
Anticipated number of parties to attend mediation of family group conferencing.				

Hope for family, bottom lines, strengths of family, key considerations, or other relevant information:



Parties to the Application (To list more parties to the application, continue on separate page and attach to this form.)

	Name:	Relationship to children:
City: Lawyer:	Address:	Client Phone:
	City:	Lawyer:
Postal: Lawyer's Phone:	Postal:	Lawyer's Phone:

Name:	Relationship to children:
Address:	Client Phone:
City:	Lawyer:
Postal:	Lawyer's Phone:

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Name:	Relationship to children:
Address:	Client Phone:
City:	Lawyer:
Postal:	Lawyer's Phone:

Children Named on Application

(To list more children named on application, continue on separate page and attach to this form.)

Child's Name	Current or proposed CAS Status:		
Date of Birth (d/m/y)	Temporary Care	Other (define)	
Lawyer	Supervision Order Society wardship Crown wardship		
Lawyer's Phone			

Child's Name	Current or proposed CAS Status:	
Date of Birth (d/m/y)	Temporary Care	Other (define)
Lawyer	Supervision Order Society wardship Crown wardship	
Lawyer's Phone		

Child's Name	Current or	Current or proposed CAS Status:	
Date of Birth (d/m/y)	Temporary Care	Other (define)	
Lawyer	Supervision Order		
	Society wardship		
Lawyer's Phone	Crown wardship		

Child's Name	Current or proposed CAS Status:	
Date of Birth (d/m/y)	Temporary Care	Other (define)
Lawyer	Supervision Order Society wardship Crown wardship	
Lawyer's Phone		

Child's Name	Current or p	Current or proposed CAS Status:	
Date of Birth (d/m/y)	Temporary Care	Other (define)	
Lawyer	Supervision Order Society wardship		
Lawyer's Phone	Crown wardship		

Child's Name		Current or proposed CAS Status:	
Date of Birth (d/m/y)		Temporary Care Supervision Order Society wardship Crown wardship	Other (define)
Lawyer			
Lawyer's Phone			

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Remember to include copy of the OCL notification and signed consent, as assignment cannot proceed without them.

ADR-LINK connects parties in dispute with an independent mediator or family group conference coordinator. None of the mediators or family group conference coordinators are employees of the Centre for Children and Families in the Justice System (London Family Court Clinic, Inc.) or are affiliated with the Centre. However, all mediators are certified in child protection mediation by the Ontario Association for Family Mediation and listed on its roster and all family group conference coordinators have been trained and mentored through the George Hull Centre and listed on its roster. By participating in the ADR-LINK service, you acknowledge that the ADR service is not being provided by the Centre, and agree to hold harmless ADR-LINK and the Centre for Children and Families in the Justice System (London Family Court Clinic, Inc.) for any and all claims, actions, suits, etc. brought against ADR-LINK directly or indirectly.