ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)		DR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)	FOR COURT USE ONLY	
-				
TELEPHONE NO.: ATTORNEY FOR (Name):				
S	SUPERI	OR COURT OF CALIFORNIA, COUNTY OF MENDOCINO		
		Courthouse, State and Perkins Streets rth State Street, Ukiah, CA 95482-0337		
		LE Branch Court		
700 South Franklin Street, Fort Bragg, CA 95437 PETITIONER:			CASE NUMBER:	
RESPONDENT:				
OTHER PARENT/CLAIMANT:				
	P	EQUEST FOR TELEPHONIC APPEARANCE FOR	HEARING DATE:	
		FAMILY LAW MEDIATION	TIME: DEP'T:	
		notice must be filed with the court at least 15 days before the appearance.)		
	Do not fi	le this form for a court appearance; for a court appearance you will need to file	a separate request (form number MFL-146).	
1	l (nam	e):		
••	am the petitioner/planitiff respondent/defendant other parent			
2.		I ask the Family Mediator to allow me to appear by telephone on my scheduled mediation date of		
		I like the Family Mediator to consider the following information in making		
	appearance (check all that apply):			
	a.	\Box I live or work outside of the state of California in (specify location): _		
	b.	I live in County in Californi	a, which is miles from the	
		above courthouse where the hearing is set.		
	С.	□ I am disabled.		
	d.	\Box I can not afford to travel to Ukiah or do not have reliable transportat	ion.	
	e.	□ I will be incarcerated or confined in (specifiy):		
	f.	. □ I am in the military and am currently stationed at (specify location):		
	g.	□ Other:		
4.	I understand that the Family Mediator may need to contact me to discuss my application for telephonic participation in			
	mediation.			
	a. My contact information is (provide phone number):			
	b. The best dates and times to reach me are:			
5.	If my request for telephonic appearance for mediation is approved:			
	a. I understand that mediation sessions are typically three (3) hours and that I must be available for the duration of session.			
	b.	b. I understand that I must use a land line telephone for the duration of the mediation session as mediation may		
	~	be terminated if cellular phone reception is problematic.	a telephonic appearance	
	c. d.	I understand that I am responsible for all costs and arrangements of th I understand that I must make arrangements with CourtCall, LLC (1-88 in Family Court and the Family Court Judge will refer me to family med	38-88-COURT) to appear telephonically	

e. I understand that I must ensure that I have the use of a private area for the duration of the mediation session.

- f. I understand that no other individuals, including children, may be present for the duration of the mediation session.
- g. I understand that the *Family Mediation Intake* form (local form MFL-230) must be filled out and returned to the Family Mediator, either by fax or by e-mail, **at least five (5) days prior to** the mediation session.
 - Family Mediation Intake form: <u>http://www.mendocino.courts.ca.gov/forms/MFL-230.pdf</u> Fax Number: 707-463-6874
 - E-mail to: <u>familycourtservices@mendocino.courts.ca.gov</u>
- h. I understand that I must watch the 30 minute-long video titled *Orientation to Family Court Mediation and Child Custody Recommending Counseling* at the link below **prior** to the start of the telephonic mediation session. <u>https://www.youtube.com/watch?v=wJOcjP5RikQ&hl=en%5FUS&version=3&rel=0</u>
- i. I understand that as the party appearing at the mediation session by telephone, I must sign the agreed upon *Parenting Plan* and the *Stipulation and Order* form that the Family Mediator will fax or e-mail to me on the day the mediation session concludes. I understand that I must fax or e-mail the signed documents back to the Family Mediator at the above listed fax number or e-mail address within two (2) business days of the conclusion of the mediation session. I understand that if I do not fax or e-mail those documents back to the Family Mediator within two (2) business days of the conclusion of the mediation session, we will be required to return to court to have a judge decide the matter. The Family Mediator will advise us of the court date by mail.

I have read and agree to the conditions of my request for telephonic appearance at my Family Law Mediation session, as stated under section five (5) above, and I declare, under penalty of perjury under the laws of the State of California, that the foregoing information that I have provided is true and correct.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE)