

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
FOR THE COUNTY OF KING**

Vs.

Petitioner,

NO.

CONFIRMATION OF
ISSUES/REFERRAL TO FAMILY
COURT SERVICES
(Clerk's Action Required)

Respondent.

This form is only for cases involving minor children.

1. Do both parties completely agree on what should be in the Final Parenting Plan?
[You must answer NO unless an agreed FINAL order has been signed by both parties and is ready to be entered with the court]

 YES NO

2. Do both parties agree to hire a private mediator or arbitrator if an agreement cannot be reached?

 YES NO

3. Has the court signed an order waiving mediation, or declared one party to be in Default?

 YES NO If YES, Order dated: _____

If you answered **NO** to all three questions above, you must answer the questions below. Family Court Services will automatically offer Mediation or Evaluation services.

If you answered **YES** to any of questions 1-3, you may **SKIP** questions 4-7 and proceed to the signature. Family Court Services will not automatically offer Mediation or Evaluation services. If circumstances change, you may request services via an order from the court.

4. Has either party alleged (said) that domestic violence is an issue in this case?

YES NO

5. Has either party alleged that physical and/or sexual abuse of a child is an issue in this case?

Physical Sexual NO

6. Has a private Parenting Evaluator, a GAL, or a CASA been hired or appointed by a court order?

YES NO

Name of the person: _____ and/or date of order: _____

7. Contact Information and Interpreter Needs

Petitioner: _____ Respondent: _____

Address: _____ Address: _____

Interpreter Needed? _____ Interpreter Needed? _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____
Attorney for Petitioner: _____ Attorney for Respondent: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

DATED: _____ SIGNED: _____

Petitioner or Attorney Typed Name: _____

Attorney(s) For: _____ WSBA# _____

DATED: _____ SIGNED: _____

Respondent or Attorney Typed Name: _____

Attorney(s) For: _____ WSBA# _____