 The Family Court of the State of Delaware

In and For  New Castle  Kent  Sussex County

**REQUEST FOR TELEPHONIC PARTICIPATION AT MEDIATION**

*Petitioner v. Respondent*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name & Telephone# |  | Name & Telephone# |  | File Number |
|  |  |  |  |  |
| Attorney Name & Telephone# |  | Attorney Name & Telephone# |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| *2nd Petitioner (if any)* |  | *2nd Respondent (if any)* |  | Case Number |
| Name & Telephone# |  | Name & Telephone# |  |  |
|  |  |  |  |  |
| Attorney Name & Telephone# |  | Attorney Name & Telephone# |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| Type of Petition: |  |
|  |  |
| Mediator: |  |
|  |  |
| Date/time scheduled: |  |

|  |  |
| --- | --- |
| My address is: |  |

**I live more than 100 miles from the courthouse. I am requesting to participate in the mediation telephonically.**

|  |  |  |
| --- | --- | --- |
| Date |  | Requestor – Print Name |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requestor – Sign Name

THE REQUEST TO PARTICIPATE TELEPHONICALLY IS  GRANTED  DENIED and parties have been notified.

|  |  |
| --- | --- |
| NOTES: |  |
|  |  |
|  |  |

|  |  |  |
| --- | --- | --- |
| Date |  | Mediator |

I, the Movant, affirm that a true and correct copy of this Request was placed in the U.S. Mail on this date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | , and sent to the other party or attorney at the address listed on the petition, being | | | |
|  | | | | , first class postage pre-paid. |
| SWORN TO AND SUBSCRIBED | |  |  | |
| before me this date, | |  |  | |
|  | |  |  | |
|  | |  |  | |
|  | |  | Movant/Attorney | |
|  | |  |  | |
| Clerk of Court/ Notary Public | |  |  | |