

Cover Sheet:	Petition for Confidential Mediation
Effective Date:	February 2, 2023
Last Revision Date:	March 5, 2024
Purpose:	These forms are used to request a mediation appointment with a court mediator to discuss parenting time issues with the other parent or caretaker of your child.
	Confidential Mediation is best for parents who are able to communicate with each other and who are close to agreeing on a parenting plan but just need a little help on a few issues. The mediator will not submit recommendations to the court but will write up your agreement and you may set a hearing to seek a court order.
	You may not participate in Confidential Mediation if you and the other party have a current Restraining or Protective Order, or one that expired within the last five years
	Nothing the Mediator hears during Confidential Mediation will be disclosed to anyone. There are legally required exceptions, however: 1) If child abuse or neglect is suspected by the Mediator, a report will be made to Child Protective Services; and, 2) If a threat is made against a specific person during mediation, a law enforcement agency and the person against whom a threat was made will be contacted.
Assistance:	Parties who are acting as their own attorneys may receive help from the Self Help Center to complete these forms. You may contact the Self Help Center through the Court's website, by creating an e-Correspondence account, or visit the Self Help Center in person, Monday through Thursday.
Required Forms:	 All forms are Judicial Council forms, unless otherwise indicated: Petition for Confidential Mediation, local form FL/E-ME-804 Family Law Case Demographics Information Sheet for Child Custody/Visitation, local form FL/E-ME-811
Filing Fee:	None
Copies:	Make three copies of the completed forms. The Court will file and keep the original and will endorse and return the copies to you.
Before You File:	Serve a copy of the forms on the other party to the case and have the server complete the Proof of Service section of the Petition for Confidential Mediation.
Filing:	All forms must be typewritten or printed in blue or black ink. (See California Rules of Court, Rules 2.100-2.119)



Superior Court of California, County of Sacramento

Family	l aw &	Probate

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	Mail or place completed forms in the court drop-box located at the Family Court at 3341 Power Inn Road, Sacramento, CA 95826. Drop box hours are 8:00 am to 5:00 pm Monday through Friday, excluding Court holidays. Forms may also be filed in person between the hours of 8:30 am and 4:00 pm. You must make an appointment online or obtain a ticket from Reception to file in person.
Next Steps:	Family Court Services will mail copies of the filed Petition for Confidential Mediation and Notice of Mediation Appointment to each party.

ATTORNEY, OR PARTY IF NO ATTORNEY: State Bar No.:	For Court Use Only
Name:	
Address:	
City/State/Zip	
TELEPHONE NO.:	
ATTORNEY FOR: (Name)	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO STREET ADDRESS: 3341 Power Inn Road MAILING ADDRESS: Same CITY, STATE, AND ZIP CODE: Sacramento, CA 95826	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
CLAIMANT:	
PETITION FOR CONFIDENTIAL MEDIATION	Case No.:
Do you have a current Restraining or Protective Order against the other years?	er party, or one that expired within the past 5
☐ No ☐ Yes (If yes, you are not eligible for Confidential	Mediation)
2. We would like assistance resolving issues related to: (Please check	all that apply and provide a brief explanation)
☐ Custody ☐ Visitation ☐ Other	
I declare under penalty of perjury that the foregoing information is true and	correct.
Dated:/ Signature of Declarant:	
Type or Print Name:	
PROOF OF SERVICE 1. I am at least 18 years old, am not a party to this case, and I am a reswas completed. 2. I served a copy of this document by: Enclosing it in a sealed envelope and depositing it with the U.S. Por The envelope was addressed and mailed as follows: Name of person served: Address: Date mailed: Place of mailing (cit	ostal Service with the postage fully prepaid.
Personally delivering a copy to the person served, as follows:Name of person served:	
Date served: Time served: Address:	
I declare under penalty of perjury under the laws of the State of California	
Dated:/ Signature of Person Doing the Serving:	
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Family Law Case Demographics Information Sheet for Child Custody/Visitation

Petitioner's Information	Petitioner's Attorney Information		
First Name Middle Initial Last Name	First Name Middle Initial Last Name		
Mailing Address (Include Apt. or Suite #)	Mailing Address (Include Suite #)		
City State Zip Code	City State Zip Code		
Date of Birth: Month Day Year	Work Phone: ()		
Home Phone: ()			
Work Phone: ()			
Relationship to Child/ren:			
Respondent's Information	Respondent's Attorney Information		
	Respondent's Attorney Information First Name Middle Initial Last Name		
First Name Middle Initial Last Name			
First Name Middle Initial Last Name Mailing Address (Include Apt. or Suite #)	First Name Middle Initial Last Name		
First Name Middle Initial Last Name Mailing Address (Include Apt. or Suite #) City State Zip Code	First Name Middle Initial Last Name Mailing Address (Include Suite #)		
First Name Middle Initial Last Name Mailing Address (Include Apt. or Suite #) City State Zip Code Date of Birth: Month Day Year	First Name Middle Initial Last Name Mailing Address (Include Suite #) City State Zip Code		
First Name Middle Initial Last Name Mailing Address (Include Apt. or Suite #) City State Zip Code Date of Birth: Month Day Year	First Name Middle Initial Last Name Mailing Address (Include Suite #) City State Zip Code		

Claimant's (3 rd Party's) Information			Claimant's A	Attorney Information	
st Name Middle Initial	Last Name	-	First Name Middle	Initial Last Name	
Mailing Address (Include Apt. or Suite #)		-	Mailing Address (Include Suite #)		
te of Birth: Month Day me Phone: () ork Phone: () ationship to Child/ren:			City Work Phone: ()	State Zip Code	
List all of the children you	_		· · · · · · · · · · · · · · · · · · ·		
Full Name	Date of Birth	Age	School	Resides with	
es any party need an interpre					
es, for which party?	Petitioner	Resp	ondent Clai	mant / 3 rd Party	
es, please indicate for what I	anguage?				
eclare under penalty of perjur	y that the foregoing info	ormation is	true and correct.		
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