

CLOSING FORM

STATE OF NORTH DAKOTA
COUNTY OF _____

IN DISTRICT COURT
_____ JUDICIAL DISTRICT

A.B.,)
 Plaintiff,)
)
vs.)
)
C.D.,)
 Defendant.)

Civil No. _____

FAMILY MEDIATION PROGRAM CLOSING FORM

No mediation due to: _____

Mediation outcome – Primary residential responsibility, parenting time, grandparent visitation only

- Agreement reached on all issues
- Agreement reached on some issues
- No agreement reached

Mediation outcome – other issues in case

Were other issues present in the case? Yes or No (circle one)

Did parties mediate other issues? Yes or No (circle one)

- Agreement reached on all other issues raised by parties
- Agreement reached on some other issues raised by parties
- No agreement reached on other issues raised by parties

Mediator's Name & Signature: _____
Date _____

Cc: The Court, FMPP Administrator, Parties/Attorneys