

CHILDREN'S COURT MEDIATION PROGRAM

NO AGREEMENT LETTER

Date: _____

CYFD Facts #: _____ Court Case JQ#: D- _____ -JQ- _____ - _____

County: _____ Judicial District: _____

Family Names: _____

Name of Youngest Child on the Case:

Last Name: _____ First Name: _____

The parties _____ and _____ participated in the mediation process.

The mediation session was held on _____.

We appreciate their participation; unfortunately, they were unable to reach a mutual agreement through the mediation process.

MEDIATOR