



- I acknowledge that the purpose of the video settlement appointment is to reach an agreement in my family law case. I understand that we cannot address child custody/visitation or domestic violence issues.
- I understand that the Settlement Officer for this appointment will be a Court Self-Help staff member.
- I agree to participate in a video settlement discussion to resolve either a part of or all of my family law case unrelated to child custody/visitation or domestic violence.
- I agree that if there is an unexpected reason why I cannot make my appointment I will immediately call the other party and the Self-Help Center to let them know of the cancellation.
- I understand I may have to reschedule the appointment to the next date and time that is available for all parties and the Settlement Office.

**I acknowledge and confirm the above by my signature below.**

Petitioner	Date	Respondent	Date
Attorney for Petitioner	Date	Attorney for Respondent	Date

**FOR COURT USE ONLY**

Date Received: \_\_\_\_\_  Eligible  Ineligible - Reason: \_\_\_\_\_

Appointment Date: \_\_\_\_\_

Confirmation Sent: \_\_\_\_\_  E mailed  Mailed  In Person