

**IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, PROBATE DIVISION**

Case No. _____ Calendar _____

Estate of _____

A minor

AGREED ORDER FOR MEDIATION

1. The mother father _____ Telephone: _____
resides at _____

2. The interested party _____ Telephone: _____
resides at _____

3. The child(ren) whose guardianship is being determined:

Name	Age	Present Residence
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. There have been no indicated DCFS cases against the involved parties in the past three (3) years.

IT IS HEREBY ORDERED:

A. All parties shall participate in mediation through the Center for Conflict resolution located at 11 East Adams, Suite 500; Chicago, IL 60603.

B. Both parties shall contact the Center for Conflict Resolution at (312) 922-6464; fax (312) 922-6463, within the next five (5) days.

C. This matter is set for status on _____ at 10:00 a.m. for return on mediation.

ENTERED: Dated: _____ /s/ _____
Judge Judge's No.