

District Court, Fremont County, Colorado 136 Justice Center Road Canon City, CO 81212 Petitioner/Plaintiff: _____ Respondent/Copetitioner/Defendant: _____	▲ Court Use Only ▲
Pro Se	Case: # _____ Division: _____
MOTION FOR FINDING OF ELIGIBILITY TO RECEIVE MEDIATION SERVICES WITHOUT PAYMENT AND SUPPORTING FINANCIAL AFFIDAVIT	

I, _____ respectfully move the Court for a finding of eligibility to receive mediation services without payment as grounds state that I am without funds, have no adequate funds available.

Instructions: All items must be fully completed. Please include information for all parties in the household (including spouse, and/or other household members.) Print or type neatly. If an item does not apply, write N/A.

APPLICANT

Applicant is the: <input type="checkbox"/> Petitioner/Plaintiff <input type="checkbox"/> Respondent/Copetitioner/Defendant		
Last Name:	First Name:	MI:
Address:		
Residence: <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other:		
Home Telephone #:	Date of Birth:	
Driver's License #:	State:	Social Security #:

I swear under penalty of perjury that all information provided is true and complete. In addition, I authorize the Court to make any necessary contacts to verify the information.

Signature: _____ Date: _____

FINDING AND ORDER CONCERNING PAYMENT OF FEES
The court has reviewed the Motion to Receive Mediation Services Without Payment and Supporting Financial Affidavit and finds that mediation has been ordered by the court and the applicant's request is:
<input type="checkbox"/> Granted: The applicant is eligible to receive mediation services without payment. The Mediator may apply for payment through State-Pay, Agency-Pay, A & V Grant, or any other indigent or low-income payment programs administered by the Colorado Judicial Branch's Office of Dispute Resolution.
<input type="checkbox"/> Denied: The applicant is not eligible to receive mediation services without payment.
<input type="checkbox"/> Other: _____
So ordered this _____ day of _____, 200_____
_____ Judge/Magistrate

HOUSEHOLD SIZE AND MEMBERS

DEPENDENTS

Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed		
Number of persons living in your household:		
Name:	Age:	Relationship:
Name:	Age:	Relationship:
Name:	Age:	Relationship:
Name:	Age:	Relationship:
Name:	Age:	Relationship:
Name:	Age:	Relationship:

SPOUSE/OTHER HOUSEHOLD MEMBER WITH WHOM YOU SHARE INCOME & EXP.

Last Name:	First Name:	MI:
Driver's License #:	State:	Social Security #:

HOUSEHOLD INCOME & EXPENSES

APPLICANT'S INCOME

Most Recent Employer:	Telephone #:
Work Address:	
Dates of Employment:	Hours/Week: Rate of Pay: \$

Monthly Income of Applicant	
Wages—including tips, salary, commissions, bonuses	\$
Business Income: net income from businesses, royalties, rentals, etc.	\$
Investment Income: dividends, interest, capital gains, annuities, etc.	\$
Retirement Income, SSD, SSI, Workers' Comp., Unemployment Benefits	\$
Maintenance (Alimony) Received	\$
Total Applicant Income	\$

INCOME OF SPOUSE OR OTHER HOUSEHOLD MEMBER *

Most Recent Employer:	
Work Address:	Work Telephone #:
Dates of Employment:	Hours/Week: Rate of Pay:

Monthly Income of Spouse or Other Household Member	
Wages—including tips, salary, commissions, bonuses	\$
Business Income: net income from businesses, royalties, rentals, etc.	\$
Investment Income: dividends, interest, capital gains, annuities, etc.	\$
Retirement Income, SSD, SSI, Workers' Comp., Unemployment Benefits	\$
Maintenance (Alimony) Received	\$
Total Income of Spouse or Other Household Member	\$

MONTHLY HOUSEHOLD EXPENSES

Item:	Amount
Rent or Mortgage	\$
Household Expenses: Food, Clothing, etc.	\$
Utilities	\$
Child Support and Maintenance (alimony) Paid	\$

Medical/Dental	\$
Other Expenses:	\$
Debt monthly payments: credit cards and other unsecured debt	\$
Total Expenses	\$

LIQUID ASSETS

	Total \$
Cash on Hand: (cash you are carrying with you or which is stored at home)	\$
Bank Accounts: Checking Bank Name:	\$
Bank Accounts: Savings Bank Name:	\$
Real Estate Equity (fair market value less mortgage and home equity loans)	\$
Motor Vehicle Equity (fair market value less any loans secured by the vehicles)	\$
Investments Accounts: CDs, Stocks, bonds, etc.	\$
Property which could be readily converted into cash	\$
Other Liquid Assets	\$
Total Liquid Assets	\$

For Court Use Only:

FAMILY SIZE	
Applicant:	1
Souse or Other Household Member	
Dependent Children and Others	
Total Family Size	

QUALIFICATION CRITERIA	
Allowable Monthly Income Guideline Amount	\$
Total Household Monthly Income	\$
Is the total monthly income less than the monthly income guideline amount	
Total Liquid Assets	\$
Is the total liquid assets amount equal to \$1,500.00 or less	
Does this applicant qualify under criteria #1	

Criteria for Determining Eligibility for ODR State-Pay Programs

An applicant can qualify for waiver of mediation costs in domestic relations cases if his or her financial circumstances meet criteria described below:

INCOME ELIGIBILITY GUIDELINES

Family Size	Monthly Income Guidelines	Yearly Income Guideline
1	\$1,083.00	\$13,000.00
2	\$1,458.00	\$17,500.00
3	\$1,833.00	\$22,000.00
4	\$2,208.00	\$26,500.00
5	\$2,583.00	\$31,000.00
6	\$2,958.00	\$35,500.00
7	\$3,333.00	\$40,000.00
8	\$3,708.00	\$44,500.00

For family units with more than eight members, add \$354 per month to "monthly income" or \$4,250 per year to "yearly income" for each additional family member.

Gross Household Income. Includes income from all members of the household who contribute monetarily to the common support of the household. Income categories to include: Wages, including tips, salaries, commissions, payments received as an independent contractor for labor or services, bonuses, dividends, severance pay, pensions, retirement benefits, royalties, interest/investment earnings, trust income, annuities, capital gains, unemployment benefits, Social Security Disability (SSD), Social Security Supplemental Income (SSI), Workman's Compensation Benefits, and alimony.

Income of Roommates: Income from roommates should not be considered if such income is not commingled in accounts or otherwise combined with the applicant's income in a fashion which would allow the applicant proprietary rights to the roommate's income.

Excluded Income: Income categories do not include TANF payments, food stamps, subsidized housing assistance, veteran's benefits earned from a disability, child support payments, or other public assistance programs.

Liquid Assets. Includes cash on hand or in accounts, stocks bonds, certificates of deposit, equity, and personal property or investments which could readily be converted into cash without jeopardizing the applicant's ability to maintain home and employment.

Expenses. Nonessential items such as cable television, club memberships, entertainment, dining out, alcohol, cigarettes, etc., shall not be included. Allowable expense categories are listed on JDF 205.