



JOINT REQUEST FOR A SETTLEMENT CONFERENCE

District of

N° de dossier

We submit a joint request for a settlement conference in order to find a solution to our dispute through the signing of an agreement.

We hereby agree to respect the confidentiality of any discussions that take place during the settlement process, including telephone conversations, meetings of all the parties, and individual meetings.

Signed at

On

Director of Youth Protection

Father

Signature_____

Signature_____

Phone

Phone

E-mail

E-mail

Attorney for the Director of Youth Protection

Attorney for the father

Signature_____

Signature_____

Phone

Phone

E-mail

E-mail

Child or youth

Mother

Signature_____

Signature_____

Phone

Phone

E-mail

E-mail

Attorney for the child or youth

Attorney for the mother

Signature_____

Signature_____

Phone

Phone

E-mail

E-mail

This form should be returned to the clerck’s office of the Youth division at the courthouse concerned