ANNEXURE "A"

(ACT 24 OF 1987)

REGULATION 2 OF THE MEDIATION IN CERTAIN DIVORCE MATTERS REGULATIONS, 1990

ARRANGEMENTS REGARDING DEPENDANT AND MINOR CHILDREN

		CASE NO
N THE I	MATTER BETWEEN:-	PLAINTIFF/APPLICANT
AND		DEFENDANT/RESPONDEN ⁻
	RTICULARS OF PLAINTIFF/APF RESIDENTIAL ADDRESS:	LICANT:
2.	POSTAL ADDRESS:	
3.	TELEPHONE NO. (HOME) (WORK)	
4.	NAME AND ADDRESS OF E	PLOYER:
5	GROSS MONTHLY INCOME EXTENT OF MONTHLY FINA	IF KNOWN:

PAF	RTICULARS OF DEFENDANT/R	
1,	RESIDENTIAL ADDRESS:	
2.	POSTAL ADDRESS:	
3.	TELEPHONE NO. (HOME) (WORK)	
	,	
4.	NAME AND ADDRESS OF EM	IPLOTEIX.
5	. GROSS MONTHLY INCOME,	IF KNOWN:
6	. EXTENT OF MONTHLY FINA	NCIAL COMMITMENTS, IF KNOWN:
) . !	GENERAL INFORMATION:	TO JOSE AND DATE OF RIPTH OF FACH MINOR OR DEPENDANT CHILD OF THE

1. STATE FULL NAME, GENDER (SEX) AND DATE OF BIRTH OF EACH MINOR OR DEF MARRIAGE:

ARRIAGE.	DATE OF BIRTH	GENDER
FULL NAME	DATE OF BIRTH	
2.		
3.		
4.		
5.		
6.		
		Page 3

2. STATE WITH WHOM THE CHILDREN ARE LIVING AT PRESENT:

3.	STATE WHERE THE CHILDREN ARE TO LIVE, FURNISH PARTICULARS OF THE ACCOMMODATION, WHAT OTHER PERSON(S) (NAME THEM) ARE LIVING THERE AND WHO WILL LOOK AFTER THE CHILDREN, IF IT IS PROPOSED THAT THE CHILDREN SHOULD BE IN THE CARE OF A PERSON(S) OTHER THAN YOURSELF STATE WHETHER OR NOT THAT PERSON(S) HAS AGREED TO THIS ARRANGEMENT. STATE THIS RELATIONSHIP OF SUCH OTHER PERSON(S) TO THE CHILDREN.
4.	STATE THE NAME OF THE SCHOOL OR OTHER EDUCATIONAL ESTABLISHMENT WHICH YOUR CHILDREN ARE AT PRESENT ATTENDING, OR IF ANY OF THEM ARE ALREADY WORKING, THEIR PLACE OF EMPLOYMENT, THE NATURE OF THEIR WORK AND DETAILS OF ANY TRAINING THEY ARE RECEIVING ATTACH COPIES OF THE MOST RECENT SCHOOL REPORTS.
5.	IS IT ENVISAGED THAT THE CHILDREN, AFTER THE CONCLUSION OF THE ACTION/APPLICATION, WILI HAVE TO CHANGE SCHOOLS? IF SO, GIVE FULL DETAILS:
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6. DO ANY OF THE CHILDREN EXPERIENCE LEARNING PROBLEMS? ARE ANY OF THEM IN ANY RESPECT PHYSICALLY OF MENTALLY DISABLED? IF SO, GIVE FULL DETAILS AND ATTACH RECENT MEDICAL

	KEPOKIS,
*	
7.	STATE WHO IS SUPPORTING THE CHILDREN AT PRESENT, OR CONTRIBUTING TO THEIR SUPPORT, AND TO WHAT EXTENT:
8.	WHAT ARRANGEMENTS HAVE BEEN MADE REGARDING RIGHTS OF ACCESS OF YOUR HUSBAND/WIFE'S STATE THE DETAILS OF ANY SUCH ARRANGEMENTS.
9,	SET OUT ANY FURTHER DETAILS CONCERNING YOUR MINOR OR DEPENDANT CHILDREN WHICH MAY BE RELEVANT TO THE CUSTODY OF, ACCESS TO AND FINANCIAL PROVISIONS FOR SUCH CHILDREN, E.G. WHETHER ANY SUCH CHILDREN HAVE BEEN CONVICTED OF ANY CRIMINAL OFFENCE OR WHETHER ANY SUCH CHILDREN HAVE BEEN SUBJECT TO ANY ORDER IN TERMS OF THE CHILD CARE ACT, 1983 (ACT NO. 74 OF 1983);
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ATA ERE YOU OR A MEMBER OF YOUR FAMILY KNOWN TO A WELFARE ORGANISATION OR AGENCY? IF SO ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION/AGENCY AND WHERE IT OPERATES: ATABLE THE NAME OF THE ORGANISATION AND THE NAME OF THE ORGANISATION AND T	•				
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	3; JON OK YGENCKS IE 80'	TO A WELFARE ORGANISAT SETARE IT OPERAIES	JR FAMILY KNOWN .	S A MEMBER OF YOU	11. ARE YOU OF
DEPENDANT CHILDREN ARE THE RESULT OF MUTUAL AGREEMENT WITH YOUR HUSBAND-MIFE:	17 1864/010 (000)				

10. STATE BRIEFLY THE EXTENT TO WHICH THE ABOVE ARRANGEMENTS RECARDING YOUR MINOR OR

OATH/AFFIRMATION

	EBY DECLARE UNDER OATH/HEREBY TRULY AFFIRM, THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE EGOING STATEMENTS ARE TRUE, COMPLETE AND CORRECT.		
	NATURE OF DEPONENT		
	tify that, before administering the oath/affirmation, I asked the deponent the following questions and wrote down his/her wers in his/her presence.		
1.	Do you know and understand the contents of the above declaration? Answer:		
2.	Do you have any objections to taking the prescribed oath? Answer:		
3.	Do you consider the prescribed oath to be binding on your conscience? Answer:		
utte	rtify that the deponent acknowledged that he/she knows and understands the contents of this declaration. The deponent red the following words Al swear that the contents of this declaration are true, so help me God@/Al truly affirm that the tents of this declaration are true@. The signature/mark of the deponent was affixed to the declaration in my presence. MMISSIONER OF OATHS		
	LL NAME(S) AND SURNAME		
DE	SIGNATION (RANK) EX OFFICIO REPUBLIC OF SOUTH AFRICA		