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|  |  *ONTARIO* |  | Court File Number |
| Superior Court of Justice, Family Court |  |
| *(Name of Court)* |  |
| **at** |  |  |
| *(Court office address)* | **TRIAL READINESS FORM** |
|  |  |
| Applicant(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). |
|  |  |
| Respondent(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). |
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Children’s Lawyer

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| Name & address of Children’s Lawyer’s agent for service (street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any)) and name of person represented. |
|  |

Sittings

1. This matter is currently scheduled for a \_\_\_\_\_ day trial during the three-week trial sittings of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does this time estimate remain accurate?
	1. Y □ N □
	2. If no, how many days of trial time do you estimate are now required? \_\_\_\_\_
3. Your side of this action is ready and wishes to proceed on this sitting?
	1. Y □ N □
4. An adjournment of this trial is being requested by:
	1. □ One party (please identify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. □ Both Sides
	3. □ N/A
5. What is the reason for the requested adjournment? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. If both sides are jointly requesting an adjournment, which trials sittings should this matter be adjourned to? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Availability

1. The parties request that the matter proceed as follows:
	1. □ In person only at the courthouse (no party, counsel, or witness that I intend to call needs to appear by video);
	2. □ By remote hearing only (no party, counsel, or witness that I intend to call needs to appear in person);
	3. □ In a hybrid hearing, if the court has a court available with the necessary technical capability (some counsel/parties/witnesses will attend in person and others will appear remotely)

Please specify if it is counsel or a party or a witness who is unable to attend at the courthouse; if it is a witness – how much trial time was allocated for that witness in the TSEF?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* 1. □ Both sides do not agree on the appropriate forum;
	2. □ Both sides can accommodate either in-person or remote hearing.

Trial Record

1. I confirm that the Trial Record has been:
	1. Served on all other parties? Y □ N □
	2. Filed physically at the Family Court litigation counter in duplicate? Y □ N □
	3. Filed electronically through the [Family Submissions Online](http://www.ontario.ca/familyclaims) portal? Y □ N □

Proposed Exhibits

1. I confirm that all Exhibits that my side intends to rely upon at trial have been:
	1. Served on all other parties? Y □ N □
	2. Filed physically at the Family Court litigation counter in duplicate? Y □ N □
	3. Filed electronically through the [Family Submissions Online](http://www.ontario.ca/familyclaims) portal? Y □ N □

Case Management

1. Would a further settlement conference be helpful to assist in resolving or narrowing the substantive issues?
	1. Y □ N □
2. The following judges have provided a substantive opinion in this matter:
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information

1. The contact information to be used by the Office of the Trial Coordinator to advise my side that this matter has been called for trial is:
2. Telephone number of counsel or self-represented party:
3. E-mail address of counsel or self-represented party:

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| --- | --- | --- | --- |
|  | *Signature of Lawyer or* *Self-Represented Party* |  | *Date of signature* |