State of Minnesota

County

District Court

Judicial District:	
Court File Number:	
Case Type:	

Petitioner

and

Social Early Neutral Evaluation Provider's Report

Respondent

[ENE Providers: Please file this form within 5 business days of completion of the ENE Process. If the provider is an attorney, this form must be eFiled using document type name "Social Early Neutral Evaluation Provider's Report" for electronic filing. Do not use this form for mediation, private ENE, or other ADR processes. Do not file any additional correspondence or cover sheet with the court other than a request for an extension of time. R.114.10(c)(2).]

The parties were scheduled for an initial SENE session on: _____ (date).

The initial session was rescheduled by the agreement of the participants and providers to: _____(date).

The parties also attended (an) additional ENE session(s) on _____ (date).

1. The SENE did not occur as ordered. R.114.10(c)(1). [SENEDIDNTO]

2. The provider(s) deem(s) this case inappropriate for SENE. R.114.10(c)(4). [SENEDIDNTO]

3. The parties did not reach an agreement on any matter during SENE. R.114.10(d)(1). [SENENOSET]

4. The parties reached a partial or temporary agreement at SENE. R.114.10(d)(2). [SENEPARTSE]

5. The parties reached a full, permanent agreement at SENE. R.114.10(d)(2). [SENEFULLSE]

6. A memorandum of understanding is also being filed. R.114.10(d)(2).

The parties or their attorneys will file any needed documents with the court within _____ days.

Signature of SENE Provider			Date	Signature of Other SENE Provider	Date
Printed name				Printed name	
cc:	_	 Petitioner's Attorney: Respondent's Attorney: 			