**MEDIATION INTAKE FORM**

*INSTRUCTIONS*: This form should be completed by the person who is making the administrative arrangements on behalf of the parties seeking mediation. It must be submitted at the same time as the Request for Mediation and Agreement to Mediate in Good Faith. Submit the three forms to the Office of ADR, Defense Office of Hearings and Appeals, P.O. Box 3656, Arlington, VA 22203-1995 or fax the forms to (703) 696-6865.

Point of Contact:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
          Position:     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
          Telephone #
          Commercial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
          Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
                                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed date or dates when the parties would like the mediation to begin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the mediator will need a security clearance, please specify the level required or N/A if not applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is specialized knowledge or experience needed to mediate this case? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, what type of knowledge or experience? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location where the mediation will be held (room number, building, street, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are any special arrangements necessary to obtain access to this location, such as gate or building pass? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a party to this dispute is in a bargaining unit, has his/her exclusive representative been informed and does the union concur with the intent to mediate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have a local instruction or agreement that requires referral of a specific number of mediators to the parties, please indicate how many names you must have or N/A, if not applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a mediator is unavailable in the local commuting area, should the search be extended to include the other prospective mediators in your geographic area?

Yes \_\_\_\_\_\_\_\_\_\_\_\_\_ (It is understood that this will entail paying travel and per diem cost)
No \_\_\_\_\_\_\_\_\_\_\_\_\_\_