



Office for Dispute Resolution

**File No.:** 4755W-JS

Dear :

The following information references the scheduled mediation for :

**Date:**

**Time:**

**Place:**

Attached is a list of enclosures for this case. Carefully review the Mediation Case Description as it identifies important information for this mediation. After the mediation is completed you are requested to return signed forms, evaluations and voucher with receipts attached.

, the contact person at the mediation site can be reached at .  
The contact person is available to assist you with directions or any emergency the day of mediation.

Finally, please call and confirm receipt of case material and arrange for a followup conference to debrief on the case. Should an emergency arise and you cannot mediate, please call so another mediator can be assigned to the case.

Good Luck in your efforts to help in the resolution of this dispute.

Sincerely,

Case Manager



Office for Dispute Resolution

**MEDIATION CASE DESCRIPTION**

**FILE NO.:** 4755W- JS

**MEDIATOR:**

**DATE:**

**TIME:**

**PLACE:**

**CONTACT PERSON:**

**PHONE:**

**CLIENT:**

**DOB:**

**AGE:**

**GENDER:**

**MH/MR AGENCY:**

**ISSUE(S):**

**MEDIATION INITIATOR:**

**PARTICIPANTS NAME / RELATIONSHIP**

**GUARDIAN PARTICIPANTS:**

**MH/MR PARTICIPANTS:**

**AUTHORIZATION OF  
RESOURCES:**