## The Sounding Board Request for Mediation Services

Initiator			Re	spondent			
Name				Name			
Address				Address			
Day Time Phone			Do	y Time Phone			
Email				Email			
Is mediation volunta	ry? Initiator:	☐ Yes	□ No Resp	ondent:	Yes No		_
Have previous altero Are there outstanding If yes please describe	ng legal issues?	ne parties b	een violent in ai	ny way?	Yes □ No Yes □ No		_
Nature of Complaint	::		Des	scribe if "other	,u;		
Please provide at	least three dat	es and tim	nes you would	be available	e for mediatio	n.	
	First Choice		Second Choice		Third Choice		
Date:		Date:		Date:			
Time:		Time:		Time:			
The Sounding Board will n	nake every effort to a		our schedule; howe pility, must also be		s of the respondent	and mediator, as well as	
The Sounding Board each party to provid	•		We normally as	k for a \$15.	00 (tax-deduct	rible) donation from	_
Is Initiator able	to pay? 🗌 Yes	s No	Is	Respondent a	ble to pay?	Yes No	
I am attempting to resolv will attempt to contact ma law to report all instances My initials will act as my l	e and the Respondent. s of child and elderly a	I am aware tl abuse to the po	hat The Sounding B blice. My communic	oard cannot offe	r legal advice, and th	hat they are required by	_
Signature:							
Date:							

It is the goal of The Sounding Board to respond to requests for mediation services within three business days.