Request for Mediation

To be completed by the local BU President and be submitted to the assigned Educational Services Field Secretary.

Please check the following (✓	):		
☐ The conflict which exists between	the disputants is	specific	
$lacksquare$ All parties involved in the conflict ${}_{ }$	perceive the med	iator to be a neutral third	party
lacksquare All parties involve understanding t	he nature of med	iation and are entering th	e process in good faith
lacksquare The Bargaining Unit Office has agr	eed to arrange ar	ny time release required t	o allow the disputants participate in
mediation			
lacksquare The Bargaining Unit Office has agr	eed to arrange fo	r a location where a medi	ation can take place
lacksquare The dispute is NOT before the Ont	ario College of Te	achers or the Ontario Lab	our Relations Board
☐ The dispute is NOT subject to crim	inal charges or ci	vil action	
lue There are NO on-going employer h	arassment comp	laints involving one or mo	re of the participants in the mediation
☐ There is NO Judicial Council comp	laint being filed o	r that the timelines for a J	C complaint have expired
☐ There is NO active grievance or an	y grievance conte	emplated involving anythin	ng related to this request for
Required information:			
District/Bargaining Unit in which conflict exists: /			
Contact person in the Bargaining Unit:		, contact	info:
-		, contact inio	
Names and contact information of disp	utants:		
Name	BU	Phone #	E-mail
	1		
	not include work	e-mail address of phor	e numbers.
Submitted:			
Ву:	Date:		
This document contai	ns information ar	nd will be destroyed on co	mpletion of mediation.

