

**STATE OF OREGON**  
**ERB Mediation Request Form**  
**For Appeals under the STATE PERSONNEL RELATIONS LAW (SPRL)**

A request for mediation in a SPRL case may be made through the assigned Administrative Law Judge or by downloading this form and mailing, faxing or e-mailing it to the address below. You may also request mediation using a different format; however, the data requested in this form should be included. All correspondence should be submitted to:

ERB Conciliation Service  
528 Cottage St. NE, Suite 400  
Salem, OR 97301-3807

(Emprel.Board@state.or.us; Fax: 503-373-0021; Phone: 503-378-6471)

1. Name and address of State Agency:	2. Name, address, phone, fax and e-mail address of Appellant (employee):
3. Name, address, phone, fax and e-mail for the Agency's Representative:	4. Name, address, phone, fax and e-mail address of Appellant's Representative, if any:
5. Date appeal filed:	6. Do both parties agree to mediation? <input type="checkbox"/> Yes <input type="checkbox"/> No*
7. Name of Administrative Law Judge (ALJ):	8. Has the ALJ set a hearing date? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", hearing date is:
9. Action(s) being appealed (attach a copy of the appeal):	10. Possible meeting dates/times, and/or restrictions on same:

11. Names and/or Signatures:

\_\_\_\_\_   
For the State of Oregon\*

\_\_\_\_\_   
Date

\_\_\_\_\_   
Employee or Employee's Representative\*

\_\_\_\_\_   
Date

\*All parties must agree to mediation in SPRL cases. Evidence of such agreement must be submitted to ERB, either in the form of a request signed by both parties or by separate communications from each party indicating their agreement.

ERB STATE PERSONNEL RELATIONS LAW (SPRL) APPEAL  
MEDIATION REQUEST FORM INSTRUCTIONS

This form is to be used to request for mediation of an appeal filed by a State of Oregon employee under ORS 240.560 or 240.570 only. All parties must agree to mediation in a SPRL appeal. Requests for mediation may also be made through the assigned ALJ.

1. Insert the name and address of the State agency for which the employee works/worked.
2. Insert the name, mailing address, phone number, fax number and e-mail address of the Appellant.
3. Insert the name, mailing address, phone number, fax number and e-mail address of the Agency's contact person.
4. Insert the name, mailing address, phone number, fax number and e-mail address of the Appellant's representative.
5. Indicate the date the appeal was filed.
6. Indicate whether or not both parties have agreed to this mediation request. In SPRL cases, both parties **MUST** agree to the mediation.
7. Insert the name of the Administrative Law Judge (ALJ) assigned to the appeal.
8. Indicate the hearing date, if one has been set by the ALJ.
9. Insert the action(s) being appealed and attach copy of the appeal.
10. Indicate the potential dates you or both parties have available for mediation. This is not required, but providing dates will expedite scheduling of mediation.
11. If submitting by fax or mail: Sign this form and insert the date this form is mailed/faxed.  
If e-mailing: Insert the name of the person submitting the request and the date it is e-mailed.  
In either case, agreement to the request for mediation must be communicated to ERB by all parties. This agreement may be communicated by phone, e-mail, fax or mail.

Cost of Mediation Services: Mediation services for State agencies and employees are provided for through an inter-agency assessment.

If you have any questions, e-mail [emprel.board@oregon.gov](mailto:emprel.board@oregon.gov) or call 503-378-6471.