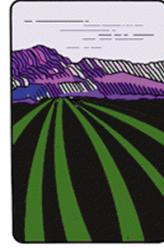


Oregon Farm Mediation Program  
Oregon Department of Agriculture  
635 Capitol St NE  
Salem OR 97301-0110  
(503) 986-4558  
1-800-347-7028



**Oregon**  
Department  
of Agriculture

## APPLICATION FOR MEDIATION

Name:

Address:

City/State/Zip:

Telephone:  
daytime/evening

Name of Attorney/Counsel  
and phone number:

Other Parties to  
the Dispute:  
Employee  
Name(s):

Address:

City/State/Zip:

Telephone:  
daytime/evening

Name of Attorney/Counsel  
and phone number:

Other information:

To assist the mediator understand the situation, please briefly describe the issues of the dispute and the current situation as you see it:

Are you seeking monetary compensation for alleged damages, contract dispute, or other claims? Yes  No

If yes, please provide an estimate of the claims according to your best judgment, or provide documentation of a professional opinion (select from list): \$Select from List

Is the other party(ies) to the dispute seeking monetary compensation for alleged claims? Yes  No  If you know how much, please provide an estimate: \$Select from List

*I submit this application voluntarily and with the understanding that mediation cannot promise results – the best efforts of the participants are a necessary element for success. I also understand that mediation sessions are confidential settlement negotiations. All communications made in a mediation session are confidential subject to provisions of ORS 36.220.*

SIGNED

Name of Party or legal representative

Date: