**Pre-Impasse Mediation**

Pre-impasse mediation is a service offered by IEERB to the parties between September 15, 2024, and November 1, 2024. The parties must both agree to the need for pre-impasse mediation and must both sign this request before IEERB will assign a mediator. The number of mediation sessions will be determined by the parties. The parties shall equally split all costs of pre-impasse mediation. IEERB will pay the mediator and then bill the parties. Invoices are due within 30 days of receipt. Parties failing to attend scheduled mediation sessions shall be charged the entire amount for the missed session (amount includes: mediator’s preparation for the session, mileage and travel expenses, time in traveling to and from the session, and time spent waiting for the party who failed to attend).

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| **Mutual Request for Pre-Impasse Mediation** |

*By submitting this form, the parties below agree to participate in pre-impasse mediation, as described above in the guidelines set forth in 560 IAC 2-4-3 and 560 IAC 2-6-10.*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Request: | | | | Click or tap to enter a date. | | | | |
|  | | | | | | | | |
| School Employer Name: | | | | | Click or tap here to enter text. | | | |
| Contact Person: | | | Click or tap here to enter text. | | | | | |
| Email: | Click or tap here to enter text. | | | | | | Phone Number: | Click or tap here to enter text. |
| Signature: | |  | | | | | | |
|  | | | | | | |  | |
| Exclusive Representative Name: | | | | | | Click or tap here to enter text. | | |
| Contact Person: | | | Click or tap here to enter text. | | | | | |
| Email: | Click or tap here to enter text. | | | | | | Phone Number: | Click or tap here to enter text. |
| Signature: | |  | | | | | | |

**This form must be submitted to** [**impasse@ieerb.in.gov**](mailto:impasse@ieerb.in.gov)**. The non-submitting party must be cc’d on the email sent to IEERB.**