

NON-SETTLEMENT – APPEAL MEDIATION

Department of _____

The undersigned parties have, either individually or collectively, come to the decision that a satisfactory agreement to resolve this grievance matter cannot be reached through this mediation forum.

The employee reserves the right to proceed to the appeal hearing before the State Employee Grievance Appeal Panel and shall make a timely request to the agency’s Grievance Officer.

By my signature, I acknowledge that I have read and understand that we cannot reach a settlement or agreement in this matter. I further understand that all matters discussed and/or information provided in this forum shall be kept confidential. **I also understand that the mediator is required by law to provide the DFA Director with a proposed resolution.**

EMPLOYEE’S SIGNATURE DATE

EMPLOYEE REPRESENTATIVE’S SIGNATURE DATE

MANAGEMENT OFFICIAL’S SIGNATURE DATE

AGENCY REPRESENTATIVE’S SIGNATURE DATE

MEDIATOR’S SIGNATURE DATE