

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MISSOURI**

_____,)
)
Plaintiff,)
)
vs.) Case No. _____)
)
_____,)
)
Defendant(s).)

PRISONER LITIGATION MEDIATION REQUEST FORM

The Mediation and Assessment Program (“MAP”) is the Western District of Missouri’s alternative dispute resolution program for civil lawsuits. The purpose of MAP is to allow parties to discuss their claims and potential ways of resolving their dispute prior to lengthy and expensive litigation. Mediation is the primary method of alternative dispute resolution offered by the Court under MAP. Mediation is a process in which a neutral third party assists the parties in developing and exploring their underlying interests (in addition to their legal positions), promotes the development of options, and assists the parties toward settling the case through negotiations. The mediator is a neutral party and cannot “make your case” for you, but he or she can and will explain the mediation process. If you are pro se, an attorney may or may not be appointed for the limited purpose of assisting you at the mediation.

The parties are encouraged to indicate whether they want to mediate by completing this form. The form may be submitted through the prison e-filing system (if applicable) or mailed to: **ATTN: Prisoner Pro Se Office, 400 E. 9th St., Kansas City, MO 64106**. There is no deadline for doing so. This form will not be publicly filed but will be reviewed internally in determining whether this case should be selected for mediation. If this case is scheduled for mediation, it does not necessarily indicate that either party has requested mediation.

Would you like for this case to be mediated? Yes _____ No _____

At what stage of the case would mediation be most helpful? (circle one)

After motions to dismiss are ruled on

After initial disclosures

After pretrial discovery has closed

If you are the plaintiff, what relief are you seeking in this case? If you are seeking money damages, state the amount sought: _____

Your name (print): _____ Signature: _____ Date: _____