



International Mediation Institute

www.IMImediation.org

Mediation Request Form

(IMI Mediator Complaint Form)

Name of Appointed Mediator: _____

Start Date of Mediation: _____

End date of Mediation: _____

Place of Mediation: _____

Nature of mediated matter: _____

IMI Professional Conduct Assessment Process:

This complaint form is to be used during Step 2 of the process.
(<http://imimediation.org/professional-conduct-assessment-process>).

Has Step 1 (Direct Discussion Step) been followed?

Yes No

Start date of the Discussion Step: _____

End date of the Discussion Step: _____

Description of complaint:
