

ELECTION FORM FOR ADR MEDIATION

(Person Counseled)	
(Address)	
(City, State, Zip)	
(Contact Telephone Number)	

(Facility/Organization)

I have been advised by my EEO Counselor that I have the option to take my complaint through the Alternative Dispute Resolution (ADR) process, to attempt a resolution for my claim(s) of discrimination. Based on the information my EEO Counselor has verbally provided to me, I can <u>select only one</u> (1) of the following two (2) options listed below to continue the processing of my complaint of discrimination:

(____) Continue with the Informal discrimination complaint process. OR (____) Participate in the Mint's Alternative Dispute Resolution Program.

Signature of Complainant/Representative

Date