##### Conciliation Scheduling

Case Your name

Role in Case: Conciliator Party Attorney Witness for Other

We are selecting dates and times for the conciliation meetings and would like to receive your input so that the schedule will be as convenient as possible for everyone involved. Please return this form to \_ by . If we do not hear from you by this date, we will assume that you are available at any time.

 Special instructions:

If you are a party or an attorney representing a party, please indicate how long you believe it will take to present your side of this case:  I am uncertain

 \_\_\_\_\_ to \_\_\_\_ hours  \_\_\_\_ to \_\_\_\_ days

 Please indicate here any days or times that you are usually not available, or that you would prefer for meetings.

 We will probably need to schedule entire days for these meetings; therefore, using the charts below, please cross out the dates on which you cannot meet (leaving open as many dates as possible). You may also circle any dates on which you would prefer to meet. (Unavailable days have already been marked off.)

 We will probably schedule meetings lasting a few hours at a time; therefore, using the charts below, please cross out the dates and times when you cannot meet (leaving open as many dates as possible). You may also circle any dates and times when you would prefer to meet. (Unavailable days have already been marked off.)

**Note: On the back of this form please give the reasons for any times that you cannot meet.**

**Month**

**Dates:**

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**Month**

**Dates:**

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