

NEW HAMPSHIRE STATE DEPARTMENT OF EDUCATION  
USERS' GUIDE TO ADMINISTRATIVE PROCESS

**101 Pleasant Street  
Concord, N.H. 03301  
FAX 603-271-4034  
Citizens Services Line 1-800-339-9900**

**AGREEMENT TO MEDIATE**

1. I understand that mediation is VOLUNTARY, and that I have chosen mediation as an alternative to hearing.
2. I understand that by VOLUNTEERING to mediate, I am doing so because I want to attempt to settle my case rather than appear at hearing on this date.
3. I understand that I may stop the mediation or the mediator may stop the mediation at any point or for any reason.
4. I understand that I am not required to mediate and that I may have my case heard by a Hearing Officer instead.
5. I understand that I may choose at any time and for any reason to, end the mediation without penalty. Furthermore, I understand that if I choose to end the mediation I may still pursue my case at an impartial due process hearing.
6. I agree that I will enter into the mediation session(s) in good faith and that all mediation proposals will be made in good faith.
7. I understand that if I do reach an agreement through the mediation process, the agreement is legally binding and can be enforced in court.
8. I agree not to use any of the information gained in the mediation session against the other party.
9. I understand that the mediation process is strictly confidential, and that no part of the discussion with the mediator, excluding violence or threats, is ever reported outside the program.
10. I agree that I will not subpoena the mediator to testify in any court proceedings connected with the mediation session or other activities related to the New Hampshire State Department of Education Alternative Dispute Resolution Program.

PARTICIPANTS:

PARTICIPANTS:

Date:

(Form ADR-M B)