



Finding common ground
through mediation

HOUSING AUTHORITY CASE INFORMATION SHEET

Names of Parties: _____

Others involved: _____

Referral Source: Name: _____

Phone: _____

Case Information (briefly describe the conflict or challenge):



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through mediation

FOR OFFICE USE:

Case #: _____

Mediation Session:

Date: _____ Time: _____

Location: _____

Mediators: _____

Phone: _____

Phone: _____

Additional Comments and/or Directions: