

## Client Information – Corporate or Organizational Party

*The information provided on this form will be used in accordance with the confidentiality provisions set forth in Rules 16 and 17 of the Rules of Procedure for Christian Conciliation of the Institute for Christian Conciliation (ICC), a division of Peacemaker® Ministries, for purposes of case administration and conciliator selection. Except for page 5, this information will not be provided to the other party or to an arbitrator; a copy will be provided to a mediator, if the parties are pursuing mediation or mediation/arbitration.*

<b>Date Submitted</b>		<b>Date Processed</b>	
<b>1. Corporate Party or Organization</b>			
<i>If this party is an organizational entity, please complete this section. Otherwise, please skip to Section 3.</i>			
<b>Name</b>			
<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Zip/Postal Code</b>
<b>Country</b>			
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<b>Referred by</b>		<b>Who lives in</b>	
<b>He/she is a:</b>			
<input type="checkbox"/> Former conciliation client <input type="checkbox"/> Pastor/church leader <input type="checkbox"/> Attorney <input type="checkbox"/> Other _____			
<b>Please provide corporate or organizational mission statement (such as statement of purpose or mission)</b>			
<i>If you are consulting an attorney about this dispute, please provide the following information.</i>			
<b>Attorney</b>		<b>Firm</b>	
<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Zip/Postal Code</b>
<b>Country</b>			
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>

Has a legal action been filed or is one likely to be filed in this situation?  No  Yes  
 If yes, give dates and describe action below.

Have you received advice from anyone else regarding this situation?  No  Yes  
 If yes, give names and dates below.

**2. Organizational Religious Background**  
*We have found that religious background can have a significant impact on how one deals with conflict. In order for us to be sensitive to your organizational convictions, it is helpful for us to receive the following information. If this party is an organizational entity, please complete this section. Otherwise, please skip to Section 3.*

Religion:  None  Christian  Jewish  Agnostic  Other \_\_\_\_\_

Please provide corporate or organizational doctrinal statement (attach additional pages, if needed):

*If you are affiliated with or under the authority of a particular church, please provide the following information:*

<b>Church</b>		<b>Pastor</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>

<i>If you are affiliated with or under the authority of a particular denomination, please provide the following information:</i>			
<b>Denomination</b>		<b>Leader's Name/Title</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<b>3. Individual Party/Organizational Representative</b> <i>Please complete this section for each individual participating.</i>			
<b>Name</b>			<b>Age</b>
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<b>Referred by</b>		<b>Who lives in</b>	
<b>He/she is a:</b>  <input type="checkbox"/> Former conciliation client <input type="checkbox"/> Pastor/church leader <input type="checkbox"/> Attorney <input type="checkbox"/> Other _____			
<b>Education (last level completed)</b>		<b>Type/major</b>	
<b>Occupation</b>	<b>Employer</b>	<b>Since</b>	
Please describe any internal or external factors that may impact the time, energy, or focus you can devote to resolving this conflict and/or to reconciling this relationship.  			
<b>Marital Status (mark all that apply):</b> <input type="checkbox"/> Never married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced ____ time(s) <input type="checkbox"/> Now married ____ yrs <input type="checkbox"/> Now separated ____ months			
<b>Spouse's name</b>	<b>Age</b>	<b>Occupation</b>	
<b>Education (last level completed)</b>		<b>Type/major</b>	
<b>If this is a family or marital dispute, please give the names and ages of your children:</b>  			

*If you are consulting an attorney about this dispute, please provide the following information.*

<b>Attorney</b>		<b>Firm</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>

**Has a legal action been filed or is one likely to be filed in this situation?**  No  Yes  
**If yes, give dates and describe action below.**

**Have you received advice from anyone else regarding this situation?**  No  Yes  
**If yes, give names and dates below.**

**4. Personal Religious Background**

*We have found that religious background can have a significant impact on how one deals with conflict. In order for us to be sensitive to your personal convictions, it is helpful for us to receive the following information.*

**Religion:**  None  Christian  Jewish  Agnostic  Other \_\_\_\_\_

**Please describe your religious upbringing:**

Do you believe in God?  No  Yes  Uncertain If yes or uncertain:

How often do you pray to God?  Daily  Weekly  Occasionally  Never

Do you believe that when you die you will be with God eternally?  No  Yes  Uncertain  
 Why?

Have there been any recent significant changes in your spiritual life?  No  Yes (describe below)

How often do you read or study the Bible?  Daily  Weekly  Occasionally  Never

What is your opinion of the Bible?

- I don't know enough about the Bible to have an opinion.
- It is a book that contains helpful principles that I am free to follow or disregard as I think best.
- It is a book that was inspired by God and that contains helpful principles and instructions that I should follow unless I believe there is a good reason to do otherwise.
- It is a book that was inspired by God and that contains helpful principles, instructions, and commands that I should follow regardless of my feelings or preferences.
- Other: \_\_\_\_\_

Who, if anyone, has the most influence on your religious or spiritual life? (Please give names and relationships)

*If you are affiliated with or under the authority of a particular church, please provide the following information:*

<b>Church</b>		<b>Pastor</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>

**What do you want us to do? (What are your hopes and expectations in coming here?)**

**Is there any other information we should know?**

<b>5. Information about the Other Party</b>			
If this party is an organizational entity, please complete this section. Otherwise, please skip to Section 7.			
Name			
Address			
City	State	Zip/Postal Code	Country
Daytime Phone	Evening Phone	Fax Number	E-mail Address
Please provide corporate or organizational mission statement (such as statement of purpose or mission)			
Attorney		Firm	
Address			
City	State	Zip/Postal Code	Country
Daytime Phone	Evening Phone	Fax Number	E-mail Address
<b>6. Other Party: Organizational Religious Background</b>			
<i>We have found that religious background can have a significant impact on how one deals with conflict. In order for us to be sensitive to your organizational convictions, it is helpful for us to receive the following information. If this party is an organizational entity, please complete this section. Otherwise, please skip to Section 7.</i>			
Religion: <input type="checkbox"/> None <input type="checkbox"/> Christian <input type="checkbox"/> Jewish <input type="checkbox"/> Agnostic <input type="checkbox"/> Other _____			
Please provide known information about corporate or organizational doctrinal statement (attach additional pages, if needed):			

<i>If the other party is affiliated with or under the authority of a particular church, please provide the following information:</i>			
<b>Church</b>		<b>Pastor</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<i>If the other party is affiliated with or under the authority of a particular denomination, please provide the following information:</i>			
<b>Denomination</b>		<b>Leader's Name/Title</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<b>7. Other Party: Individual Party/Organizational Representative</b> <i>Please complete this section for each individual participating.</i>			
<b>Name</b>			<b>Age</b>
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip/Postal Code</b>	<b>Country</b>
<b>Daytime Phone</b>	<b>Evening Phone</b>	<b>Fax Number</b>	<b>E-mail Address</b>
<b>Relationship with you</b>		<b>How long?</b>	
Please provide as much information as possible about this person's religious orientation and commitment.			

**Preliminary Statement of Issues and Remedies**

***This page will be provided to the other party to inform the other party of the nature of the claim that has been submitted to Christian conciliation.***

*Please frame your responses in a manner that promotes conciliatory dialogue. The parties' preliminary statements of issues will form the basis of the joint statement of issues that will be submitted to the parties for approval and referenced in the parties' agreement for mediation, mediation/arbitration, or arbitration services.*

**This dispute involves:**

**The issues to be resolved or the questions to be answered through conciliation are:**

**The claims and remedies that the parties seek are:**