

REQUEST FOR WORKPLACE INVESTIGATOR SELECT: LIST ONLY

Date:	
Case Type (Check Box): AAA Workplace Investigation	
List of 5 arbitrators to be provided: 5 (\$750.00) Fees are payable at the time of submission of this form.	
Desired Qualifications for Workplace Investigators: Please include requests for professional and/or industry expertise, geographic limitations and/or locations, and any other relevant information.	

Termination of AAA Authority

With request for **Workplace Investigator List Only**, AAA services conclude with the submission of the Workplace Investigator list. Therefore, AAA services do not include, among other things, the handling of fees charged by the Workplace Investigator, inviting Workplace Investigator to serve, performance-related matters, conflict checks and disclosures, scheduling, or any other issues that might arise during the workplace investigation,

Exclusion of Liability

- a. The undersigned party agrees that neither the AAA nor any Workplace Investigator listed or appointed under this service is a necessary or proper party in judicial proceedings related to the party's workplace investigation or services under the AAA's Workplace Investigator Select.
- b. The undersigned party agrees that neither the AAA nor any Workplace Investigator listed or appointed under this service shall be liable to any party in any action for damages or injunctive relief for any act or omission in connection with the party's workplace investigation or the provision of AAA's Workplace Investigator Select.
- c. The undersigned party further agrees not to call the AAA or AAA employees as a witness in litigation or any other proceeding relating to the workplace investigation for which the AAA's Workplace Investigator Select has been utilized. The AAA and AAA employees are incompetent to testify as witnesses in any such proceeding.

Requesting Party and Representative

By executing the form below, the undersigned party and their representative acknowledge that they agree to be bound by the terms of this submission form.

Party:	Nature of Business:			
Party's Representative Name:	Firm/Organization Name:			
Address:				
City:	State:	Zip Code:		
Phone:				
Email Address:				
Signature (Required):				
You may fill out this form online and email to <u>AAAinvestigationpanel@adr.org</u> or download it, fill it out, and mail it in to Kenneth Egger, Vice President, American Arbitration Association, 230 South Broad Street, 12 th Floor, Philadelphia, PA 19102.				
Questions? Please contact Kenneth Egger at 215-731-2281 or Ann Lesser at 212-484-4084.				