



## Request for Arbitration Panel for Airline System Boards of Adjustment

Date: \_\_\_\_\_

**TO: Arbitration Services**  
 National Mediation Board  
 Washington, DC 20005 or  
 E-MAIL: [ARB@NMB.GOV](mailto:ARB@NMB.GOV)

Name of Carrier/Representative requesting the panel (please print or type):
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<b>Name of Carrier:</b>			
Name of Representative to Receive Panel:		Address:	
Telephone Number:		City, State, Zip Code:	
Fax Number:		E-mail:	

<b>Name of Union:</b>			
Name of Representative to Receive Panel:		Address:	
Telephone Number:		City, State, Zip Code:	
Fax Number:		E-mail:	

<b>Case Identification(s) Per Panel</b>			

<b>Panel –</b> A panel of seven (7) names per case is usually provided; if you desire a different number please indicate that number in the box. →	
<b>Special Requirements –</b> (Note special arbitrator qualifications, time limitations on hearing or decision, geographical restrictions, etc.)	

<b>Carrier Name and Signature:</b>	
<b>Union Name and Signature:</b>	

Although the NMB prefers to act upon a joint request of the parties, a submission may be made based on the request of a single party if the relevant collective bargaining agreement so indicates. However, any submission of a panel should not be construed as anything more than compliance with a request and does not reflect on the substance or arbitrability of the issue in dispute.