



CNMI DEPARTMENT OF LABOR

ADMINISTRATIVE HEARING OFFICE

1357 Mednilla Ave., Capitol Hill, PO Box 10000, Saipan MP, 96950 (670) 664-3291/2 hearing@dol.gov.mp www.marianaslabor.net

REQUEST FOR VOLUNTARY DISMISSAL

Instructions: A complaint may be dismissed upon its abandonment or settlement by the party or parties who filed it. If you are no longer interested in pursuing your complaint, you may request to withdraw or voluntarily dismiss the complaint by completing and submitting this form.

Case Name: _____ Case #: _____

1. I am the Complainant in this case and am requesting to:

Dismiss the entire complaint

Dismiss part of the complaint

If partial dismissal, please specify claim(s) to dismiss: _____

2. This request is for:

Dismissal without prejudice (i.e., refile amended complaint/claim)

Dismissal with prejudice (i.e., no refile)

3. The reason for this request is: (*check all that apply*)

I am no longer interested in pursuing the above-mentioned complaint/claim(s).

I have entered into an approved settlement agreement with the opposing party.

Other: _____

4. Dismissal is appropriate because: (*check all that apply*)

There are no other issues to be adjudicated by the hearing officer.

The opposing party does not object to dismissal.

Dismissal would not result in undue prejudice to the opposing party.

Other: _____

I certify that the information provided with this Request is true and complete under penalty of perjury. This Request is voluntary and I understand that dismissal may affect my ability to pursue my claim(s).

Complainant Signature

Date