



Mashantucket Pequot
Tribal Nation

MASHANTUCKET EMPLOYMENT RIGHTS OFFICE (MERO)

Withdrawal Request

For claim under Title 51, the Mashantucket Pequot Family and Medical Leave Law (MFML Law)

Claimant Name:

MERO Case Number:

A. I hereby request withdrawal of *(Mark a box that identifies what you are withdrawing, and provide additional information, if requested.):*

the following allegations of the above claim *(describe the parts of the claim you are withdrawing):*

the above claim in its entirety.

B. The reason I wish to withdraw my claim under the Mashantucket Pequot Family and Medical Leave Law is *(Mark the box that best describes the reason for your withdrawal, and provide additional information, if requested.):*

I have reached a satisfactory settlement agreement with the employer, which has been approved by the MERO.

I have reached a satisfactory settlement agreement with the employer, a copy of which has been submitted to the MERO.

I have raised or am raising the issue(s) under Title 8, M.P.T.L..

At least 180 days have passed since I filed the claim and the MERO has taken no action. *(Note: If this is the reason, a withdrawal from the MERO is not required to file your case in the Tribal Court.)*

None of the above *(explain reason):* _____

This withdrawal may be signed manually or electronically.

- When you sign your name with an ink pen, you are signing manually.
- When you type your name or otherwise make a mark electronically on the signature line, OR submit the form with your manual signature by email, fax or other electronic means, you are signing electronically. Your electronic mark must be visible in both electronic and print formats.

If you sign or submit this form electronically, you must also check the box to confirm that you understand that your electronic signature is the legally binding equivalent of your manual signature.

I am requesting withdrawal of my own free will and without any intimidation or undue influence by the employer, the MERO, or any other entity or individual.

I have chosen to sign or submit this withdrawal electronically and understand that my electronic signature is legally the same as my manual signature.

Claimant Signature

Date

Submit the completed withdrawal request form to the MERO's email, fax or mailing address below.
To submit the form by email, you must save the completed document and attach it to an email.