MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
DIVISION OF WORKERS' COMPENSATION
P.O. Box 58
Jefferson City, MO 65102-0058
labor.mo.gov/DWC

1. INJURY NUMBER

\+ ☐☐ - ☐☐☐☐☐☐☐

REQUEST FOR CONFERENCE

Please be advised that corporations and limited liability companies appearing before the Division must be represented by an attorney licensed in the State of Missouri. See ***Reed v. Labor and Ind. Rel. Commn.,*** 789 S.W. 2d 19, 20 (Mo. banc 1990).

Note: This form must be completed in its entirety and must be typed or hand printed in black ink.

Please submit this form to the appropriate adjudication office.

2. Date of Injury
3. Case Venue

4. Employee	5. Address of Employee Email Address:	6. Employee's Phone No.
7. Attorney for Employer/Insurer	8. Address of Employer/Insurer Attorney Email Address:	9. Employer/Insurer Attorney's Phone No.

10. Insurance Company and/or Third Party Administrator	11. Address of Insurance Company or Third Party Administrator, if known	12. Party Requesting the Conference

13. Please explain why you want a conference:

_____

_____

_____

_____

Signature of Party Requesting the Conference

_____ _____

Employee *Attorney Representing the employer or insurer or third party administrator*

ATTORNEYS REQUESTING CONFERENCE – Please check applicable box:

☐ Entry of Appearance has been filed with the Division.

☐ Entry of Appearance is being filed with this form, and a copy of this form has been mailed to the employee.

Please note that a copy of your Entry of Appearance along with a copy of the Request for Conference must be mailed to all parties to the proceeding, including a *pro se* employee.

An administrative law judge cannot act as an attorney for any party or give any specific legal advice to any party regarding the case. An administrative law judge shall approve a settlement agreement as long as:

- The settlement is not the result of undue influence or fraud;
- The employee fully understands his or her rights and benefits;
- The employee voluntarily agrees to accept the terms of the agreement; and
- The settlement is in accordance with the rights of the parties.

DIVISION USE ONLY

COMPLETED BY DIVISION OF WORKERS' COMPENSATION

Approved _____

Date _____

Please visit our website at **labor.mo.gov/DWC** if you have any questions about your rights or benefits under the Workers' Compensation Law. Keep a copy for your records.

Missouri Division of Workers' Compensation is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. TDD/TTY: 800-735-2966 Relay Missouri: 711