## **Checklist of Requirements**



1 – Case Details			
Case reference number	Case na	ime	
Name of party completing this	s checklist		
Are you the Applicant or Resp	ondent in this case?		
Applicant	Re	espondent	
Is this checklist agreed betwe	en the parties?		
Yes	No	)	
2 – Checklist			
Please tick the check box	to indicate that the q	uestion has been	answered
Dates to avoid for all advocates and their witnesses			
	the substantive hearing (por a 'realistic' time-estimate		nether this is a worst
Agreed format of the	e substantive hearing		
In- person	Remote	Hybrid	Not Agreed

## 2 – Checklist continued

Is an agreed outcome likely?			
Yes	No		
If so, is there a likely date for the Agreed	Outcome to be filed?		
Are there any other matters for determined disclosure; special measures; anonymity; ex	nination by the Tribunal at the CMH e.g. xpert/medical evidence etc?		
Yes	No		
If yes, please specify below			
Given the responses set out above do the parties still require a CMH?			
Yes	No		
If no, then do the parties wish to vacate a decided on the papers?	the CMH and have any outstanding matters		
Yes	No		
* FOR RESPONDENTS ONLY - Has the <u>Equ</u> been completed?	uality, Diversity & Inclusion Monitoring Form		
Yes	No (click <u>here</u> for the form)		

\*including Rule 17/Rule 19 Applicants'