

# OSAH FORM 1

This form is available online at <http://www.ganet.org/osah/form.html> or by telephone request at (404)657-2800.

OSAH USE ONLY DOCKET NUMBER:	AGENCY <b>DOL</b>	CASE CODE <b>VR</b>	DOCKET NUMBER	COUNTY	JUDGE
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**NAME OF REFERRING AGENCY: DEPARTMENT OF LABOR**

## Use This Form For VOCATIONAL REHAB Only

COUNTY OF CLAIMANT'S RESIDENCE: \_\_\_\_\_

DATE OF HEARING REQUEST: \_\_\_\_\_

**CONTACT PERSON IN REFERRING AGENCY**

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST	POSITION	EMAIL:  PAGER:
ATTORNEY NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE	GEORGIA BAR #:	EMAIL:  PAGER:

**CLAIMANT**

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST		EMAIL:  PAGER:
CLAIMANT'S ATTORNEY NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE	GEORGIA BAR #:	EMAIL:  PAGER:

**CAP REPRESENTATIVE**

CAP REPRESENTATIVE:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE	IF AN ATTORNEY, GEORGIA BAR #:	EMAIL:  PAGER:

**PARTY REQUESTING THE HEARING:**  AGENCY  CLAIMANT  CLAIMANT'S ATTORNEY  CAP REPRESENTATIVE

**DOCUMENT INITIATING THE HEARING:** As "Attachment 1" to this form, attach the document initiating the hearing.

**ISSUES TO BE RESOLVED:** As "Attachment 2", attach an outline of the legal issues and factual matters to be resolved at the hearing including specific statutes or rules to be applied at the hearing.

**SPECIAL REQUIREMENTS:** As "Attachment 3", attach a sheet identifying any statutes or rule (state or federal) establishing any specific time deadlines or procedures that are to be applied by OSAH in resolving the matter referred.

**SERVICE OF DOCUMENTS:** In addition to routine service on the agency's attorney, the agency contact person requests the following:

No service of documents prior to certification of the file to the agency after a decision

Service of all documents prior to certification of the file to the agency after a decision

Service of a copy of the notice of hearing  Service of a copy of a continuance  Service of copy of any interim orders.

All such documents will be mailed to the referring agency at the address indicated for the contact person to the contact person's attention unless written instructions provide an alternative place for service.