

Conflict Resolution Form

Please provide as much detail as possible to aid in investigating the incident.

Name (optional): _____

Contact Information (optional):

Phone Number: _____ May we text? Yes No

Email: _____ -

Date of Incident: _____

Who was involved in the incident?

Location of Incident:

What rule, policy, procedure, bylaw, guideline was violated?

Describe what happened.

Please list any witnesses to the incident.

Were any actions taken to try and resolve the situation? If so please provide details.

What would you like to see happen?

- Apology
- Better communication
- Do not want it to happen to someone else
- Notification to: _____
- Talk with the Board
- Other: