

Peer Mediation Referral

Please completely fill out this form to refer individuals for Peer Mediation. Peer Mediation is a process in which students trained in mediating conflict attempt to help their peers solve conflict. Information provided on this form will remain confidential.

Return this form to the designated box in the Guidance Office.

Referred by: _____
(First Name) (Last Name)

Date: _____
(mm/dd/yyyy)

Please describe yourself by checking one of the following options or writing a more detailed remark in the space provided next to "Other".

- Student Counselor Parent
 Teacher Administrator Community Member
 Other _____

I request that the following individuals be considered for Peer Mediation:

Full Name of Individual	Grade/Class Level
1.	
2.	
3.	
4.	

Please describe the type of conflict that has occurred between these two individuals by checking one of the following options or writing a more detailed remark in the space provided next to "Other".

- Rumor Physical Fighting Property Lost or Damaged
 Threat Bullying Name Calling
 Other _____

Please describe where the conflict occurred by checking one of the following options or writing a more detailed remark in the space provided next to "Other".

- Classroom Cafeteria Sports Field
 Hallway Restroom Bus or Transportation Vehicle
 Other _____

In the space provided below, please offer any insight on the students in conflict that may help us to understand the situation more thoroughly.
