CONFLICT RESOLUTION REQUEST FORM

Part 1 To be filled out by staff member seeking resolution for a conflict

NAME:_____ DATE:_____

Please describe the specific situation for which you are asking for help in resolving. If you have a conflict with a management decision, please include the date of the decision, who made it and any other facts that you consider relevant.

Conflict Resolution Request Form, Part 1 continued

What steps have you taken so far to resolve this conflict with the other people involved?

Remedy Desired: Please describe the specific results you are seeking through this process. Answer all that apply.

Change in another person's behavior?

Reverse or change a prior action taken by management?

Change a policy in the Employee Handbook?

Other?

| Signature: | Date: |
|------------|-------|
|------------|-------|

Conflict Resolution Request Form Part 2 To be filled out by the HR manager [General Manager if no HR manager]

Date of conflict resolution meeting _____

Who was present at the meeting?

Decision of the General Manager on this matter

Acknowledgement by staff member seeking conflict resolution.

I acknowledge that I've been informed of the general manager's decision in the conflict resolution request.

| Signature: | Date: |
|------------|-------|
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