



Curriculum Department
Peer Mediation Request Form

Today's Date: \_\_\_\_\_

Please list the names of students involved in the conflict situation:

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

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Please provide the students' schedules (if available)

Student 1: \_\_\_\_\_

1st Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

2nd Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

3rd Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

4th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

5th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

6th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

7th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

Student 2: \_\_\_\_\_

1st Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

2nd Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

3rd Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

4th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

5th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

6th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

7th Period: \_\_\_\_\_ Teacher: \_\_\_\_\_

Who requested the mediation? (Please include name)

Student: \_\_\_\_\_ Administrator: \_\_\_\_\_

Teacher: \_\_\_\_\_ Parent: \_\_\_\_\_

Counselor: \_\_\_\_\_ Dean: \_\_\_\_\_

Other: \_\_\_\_\_

Where did the conflict take place? (check one)

- Bus Classroom Cafeteria
Outdoors Home Other: \_\_\_\_\_

Please describe the conflict situation: (Use additional page if necessary)

Blank lines for describing the conflict situation.