

Community
RESOLUTION
Centre

Community Resolution Centre - Intake Application

About this Application

Please complete this application form as thoroughly as possible to help us have a better understanding of your particular situation. This helps us determine if Mediation Services is the best resource for you at this time or if another resource would better fit your needs.

Mediation Services Community Mediation Process

When your completed Intake Application has been received by Mediation Services, a caseworker will contact you. For a better understanding of what the mediation process involves, please explore our website www.mediationserviceswpg.ca and read over the Community Program brochure on the main page.

If you need help completing this application form, or have further questions please contact our offices at 204.925.3410 and ask to speak with a Community Intake worker

Send Community Application to:

VIA **MAIL** Community Intake, Mediation Services
302-1200 Portage Avenue
Winnipeg, MB R3G 0T5

VIA **FAX** 204.925.3414

VIA **EMAIL** intake@mediationserviceswpg.ca



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How did you hear about us?

*If through the city of Winnipeg, please specify what number or department

*Please specify (word of mouth/ other)

Please answer the following about yourself:

Name Age Gender Male Female

Home Phone Work / Daytime Cell

Address City Prov Postal Code

Other Contact / Email

Please answer as best you can for those people you see as directly involved in this conflict:

A) Name Age Gender Male Female

Home Phone Work / Daytime Cell

Address City Prov Postal Code

Other Contact / Email

What is/was your relationship with this person?

B) Name Age Gender Male Female

Home Phone Work / Daytime Cell

Address City Prov Postal Code

Other Contact / Email

What is/was your relationship with this person?

C) Name Age Gender Male Female

Home Phone Work / Daytime Cell

Address City Prov Postal Code

Other Contact / Email

What is/was your relationship with this person?

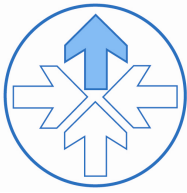


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Please check the statement that best describes your situation:

- The conflict is due to one incident that happened.
- The conflict has been ongoing. There are several issues or incidents.

Please describe the situation from your perspective and when it took place or how long it has been going on.



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How would you rate the level of emotion for yourself and others?

- | | | | | | |
|----------|---------------------------|-------------------------------|------------------------------|--------------------------------|----------------------------|
| Yourself | <input type="radio"/> Low | <input type="radio"/> Low-Med | <input type="radio"/> Medium | <input type="radio"/> Med-High | <input type="radio"/> High |
| Person A | <input type="radio"/> Low | <input type="radio"/> Low-Med | <input type="radio"/> Medium | <input type="radio"/> Med-High | <input type="radio"/> High |
| Person B | <input type="radio"/> Low | <input type="radio"/> Low-Med | <input type="radio"/> Medium | <input type="radio"/> Med-High | <input type="radio"/> High |
| Person C | <input type="radio"/> Low | <input type="radio"/> Low-Med | <input type="radio"/> Medium | <input type="radio"/> Med-High | <input type="radio"/> High |

Please describe how you and the other party have attempted to sort out this situation.

If Mediation Services would become involved with your situation, what would you hope to see happen?

Are there any other concerns that you feel may be important for a caseworker to be aware of?

- I would like assistance in resolving these issues without third party intervention, please contact me to coach me in conflict resolution strategies.
- I am interested in mediation. I understand that in order for mediation to be effective, both parties must be involved. I am willing to consider meeting with the other party.

Signature Print Date