

School Name

# Mediation Log Sheet

<u>Referral Date</u>	<u>Mediator</u>	<u>Participants</u>	<u>Additional Participants</u>
<u>Referred by</u>			
<u>Date of Mediation</u>			
<u>Time In</u>	<u>Adult Contact</u>		
<u>Time Out</u>			
<u>Conclusion and Outcomes</u>		<u>Follow Up</u>	
<u>Additional Comments:</u>		<u>Overall Success of Mediation:</u> <input type="checkbox"/> Excellent. <input type="checkbox"/> Good, situation resolving. <input type="checkbox"/> Poor, unresolved, needs follow up.	