

**MARIAN CONFLICT RESOLUTION CENTRE  
COMPLAINT FORM**

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Please provide as much information as possible using a separate page if necessary.  
The Party making the Complaint (the Complainant) provides the following information.

Date \_\_\_\_\_

**I. COMPLAINANT INFORMATION**

Name of Complainant \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Primary Occupation \_\_\_\_\_

Business/Office Address \_\_\_\_\_

Residential Address \_\_\_\_\_

Tel. /Cell(s) \_\_\_\_\_

Level of Education \_\_\_\_\_

E-mail \_\_\_\_\_

Language(s) Spoken \_\_\_\_\_

**II. OTHER PARTY'S INFORMATION**

Name of Other Party \_\_\_\_\_

Business/Office Address \_\_\_\_\_

Residential Address \_\_\_\_\_

Tel. /Cell(s) \_\_\_\_\_

Level of Education \_\_\_\_\_

E-mail \_\_\_\_\_

Language(s) Spoken \_\_\_\_\_

**III. ISSUE(S) IN DISPUTE**

1. Check category of issue(s) in dispute.

\_\_\_ (a) Debt      \_\_\_ (b) Trade      \_\_\_ (c) Personal Injury      \_\_\_ (d) Property Injury  
\_\_\_ (e) Land      \_\_\_ (f) Contract      \_\_\_ (g) Family      \_\_\_ (h) Other

Please describe "Other" or provide a supplemental description of the issue(s) in dispute.

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2. Describe any prior efforts to resolve the dispute.

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3. List any goal(s) of mediation (*e.g. reconciliation, specific relief sought*).

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4. Is there any other relevant information?

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COMPLAINANT

Interpreter (*if applicable*) \_\_\_\_\_