Facilitated Discussion Referral Form

копект

Referrer details

| Company details: | Company name: | |
|--------------------------------------|--|--------|
| | Company address: | |
| | Address of Facilitated Discussion: | |
| Facilitated Discussion requested by: | Name: | |
| | Position: | |
| | Contact number: | Email: |
| | Preferred dates of Facilitated Discussion: | |
| | Consultant requested: | |

| Details of parti | cipants | | | | | |
|--|--------------------|--|---|---|--|--|
| Contact details participant 1 | | | Name: | | | |
| | | | Work title: | | | |
| | | | Work number: | Mobile: | | |
| | | | Email: | | | |
| Is participant 1 awa | are of the referra | al for | Facilitated Discussion? | | | |
| Yes | OR | | No | | | |
| Is participant 1 agreeable to participation? | | | | | | |
| Yes | OR | | No, participant 1 is reluctant or unsure about participation (FD consultant to explore further) | | | |
| Does participant 1 require a support person? | | | | | | |
| No OR | | Yes, participant 1 would like the following person | to participate as a support person: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Contact details participant 2 | | Name: | | | | |
| | | | Work title: | | | |
| | | | Work number: | Mobile: | | |
| | | | Email: | | | |
| Is participant 2 aware of the referral for Facilitated Discussion? | | | | | | |
| Yes | OR | | No | | | |
| Is participant 2 agreeable to participation? | | | | | | |
| Yes | OR | | No, participant 2 is reluctant or unsure about partici | pation (FD consultant to explore further) | | |
| Does participant 2 require a support person? | | | | | | |
| No | OR | | Yes, participant 2 would like the following person | to participate as a support person: | | |

Background information

*Please consider privacy and confidentiality requirements when sharing information about participants.

| Details of issues / grievances between parties | └ |
|---|---------------------------|
| | |
| How long has the business been aware of the issues? | |
| What efforts to resolve the issue have been made? | |
| What outcomes is the business expecting from the Facilitated Discussion? | |
| Alternatives to Facilitated Discussion | |
| If mediation is unsuccessful, what is the next likely step in the resolution process? | |
| | |
| Are the participants aware of next steps/alternatives if Facilitated Discussion does not proc | eed or is unsuccessful? |
| What information does the business expect from the Facilitated Discussion? | |
| Confirmation of attendance Signed agreement reached Othe | r: |
| Please provide any other relevant background, additional context, or specific requests: | |
| | |
| Do you require the Facilitated Discussion consultant to contact you before proceeding with | participant contacts? |
| No, not required | |
| Yes - note: additional time may be charged for handover conversations beyond review | of referral documentation |
| Click to email us Clear form | |

