Alternative Dispute Resolution Program

Colorado Federal Executive Board
PO Box 25567
Denver CO 80225
303 202 4588

Annual Mediator Training and Activity Report

_____ _____
NAME FOR FISCAL YEAR

MEDIATIONS: Volunteer mediators will mediate a minimum of three workplace disputes per year, two of which must be for CFEB ADR Program.

LEAD MEDIATOR		**CO-MEDIATOR**		**CASES OTHER THAN CFEB ADR PROGRAM**	
_____	_____	_____	_____	_____	_____
# OF CASES	# OF HOURS	# OF CASES	# OF HOURS	# OF CASES	# OF HOURS

TRAINING: Volunteer mediators should pursue eight hours of continuing professional development annually.

_____	_____	_____	_____
DATE	# OF DAYS/HOURS	COURSE TITLE	ORGANIZATION PROVIDING TRAINING
_____	_____	_____	_____
DATE	# OF DAYS/HOURS	COURSE TITLE	ORGANIZATION PROVIDING TRAINING
_____	_____	_____	_____
DATE	# OF DAYS/HOURS	COURSE TITLE	ORGANIZATION PROVIDING TRAINING

OTHER MEDIATION ACTIVITIES

_____ # of Hours Mentoring New Mediators

Other ADR Related Activities:

PROGRAM SUGGESTIONS / COMMENTS

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- ❑ Yes, I want to continue my commitment to participate as a CFEB ADR mediator.
- ❑ No, I do not want to continue my commitment to participate as a CFEB ADR mediator. If No, please explain why.

Submit completed form to CFEB ADR Program Manager by September 30 of each year. Failure to do so may result in the mediator being dropped from the CFEB ADR roster until these reporting requirements are satisfied.

_____ _____
APPLICANT SIGNATURE (Digital Signature) DATE

INSTRUCTIONS

1. Complete and digitally sign this fillable .pdf form on your computer
2. Save as ANNUAL MEDIATOR TRAINING AND ACTIVITY REPORT – YOUR NAME
3. Email to Gay Page | gpage@colorado.feb.gov