

3. Are any of the parties an employee of the Band? Yes No
 If yes, does the conflict/dispute arise as a result of Tribal employment? Yes No
4. Does the dispute involve an employment issue? Yes No

5. Other individuals involved in this matter:
 Participant Name: _____
 Address: _____
 Telephone Number: _____

Has this participant agreed to try a Peace Circle? Yes No. Explain: _____

Participant Name: _____
 Address: _____
 Telephone Number: _____

Has this participant agreed to try a Peace Circle? Yes No. Explain: _____

NOTE: If there are other participants involved, please include this information on an additional sheet and attach to this referral form.

6. Would the participants like others to participate in the Peace Circle? I do not know. If yes, please explain and list names: _____

7. Would the participants benefit by having a Pokagon Band Department or Program participate in the Peace Circle? I do not know. If yes, please explain and list Department/Program(s):

8. Is there any other information you would like to provide or that we should know? _____

9. Do the individuals you are referring know that you are referring this? Yes No
 If no, do you wish to remain anonymous or would you like to be involved in this circle?

Referring Individual's Signature: _____ Date: _____

To be filled out by Native Justice staff:

Reference Number: _____ Date: _____