



Level 2 Conflict Report

This form is used to report a Level 2 conflict, which is an escalation after attempts for self-resolution (Level 1) have been attempted and exhausted, without a successful outcome.

Conflict Resolution Policy:

All volunteers shall have the opportunity to present their concern and work to resolve the issues in a timely manner using the Council's conflict resolution procedures.

Procedure:

- Volunteers are first expected to attempt self-resolution with the individuals involved when a conflict arises, per the documented **Conflict Resolution Guidelines and Process**. In this Level 1 Member-Led Conflict Resolution Process, a problem-solving tone should be adopted during these face-to-face discussions. If this does not resolve the issue then:
 - The parties should jointly discuss the situation with volunteer leadership, a relevant member of the Service Unit or Association team, for support and guidance. Involving a Service Unit or Association team member is a required part of the process, prior to escalating the conflict to Level 2 and staff intervention. If this does not resolve the issue, then:
 - Each party involved in the conflict should fill out a "**Level 2 Conflict Report**" and submit it either through the **online form** or email the completed PDF to deia@gscnc.org. The LEVEL 2: Staff-Led Conflict Resolution Process will commence and an appropriate staff manager and/or the DEIA manager will then review the case and begin the Discovery process. If appropriate and agreed upon by both parties, a Face-To-Face Mediation may be arranged, followed by a Recommended Course of Action.

First Name

Last Name

Phone Number

Email

Address

Street Address

City

State

Zip Code

Service Unit

Troop Number

Date(s) of Issue or Concern

Site or Location of Issue or Concern

Event

Name of Person Involved

Are they youth or adult?

Youth

Adult

Name of Person Involved

Are they youth or adult?

Youth

Adult

Name of Person Involved

Are they youth or adult?

Youth

Adult

Describe Issue or Concern

What actions have you taken to resolve this issue?

Name and role of the volunteer leader (relevant member of the Service Unit or Association team) who participated in the Level 1 Member-Led Conflict Resolution Process?

Which Council department should be involved in participating in this LEVEL 2: Staff-Led Conflict Resolution Process, given their area or department and its relevance to the specific type of conflict at hand?

- | | | |
|-----------------------------|--------------------|--------------------|
| Membership, Team 1 | Membership, Team 2 | Membership, Team 3 |
| Membership, Team 4 | Membership, Team 5 | Membership, Team 6 |
| Adult Volunteer Development | Camping | DEIA |
| Development | Product Program | Program |
| Not Sure | | |

Describe a solution you feel would resolve this issue or concern.

Signature

Date

Month Day Year