

Mediation Youth/Victim Conference

YOUTH DEMOGRAPHICS

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: _____

CONTACT INFORMATION

*Conference Date: _____

*Type of Conference (pick one): _____

Victim/Youth Conference

Youth Conference with
adult victim surrogate

Youth Conference with
youth victim surrogate

Victim Relay Hybrid

Informal Meeting

NA – no conference

Attendees (select all that apply): _____

Parent(s) of youth

Parent(s) of minor victim

Community members

Other – specify _____

No additional attendees

Narrative: _____