



Dispute Resolution Branch

Training Enquiry Form

1. Name of your organisation:
2. Contact details:
 - Name:
 - Position:
 - Organisation:
 - Phone:
 - Email:
 - Office Address:
 - Organisation website:
3. A brief description of your organisation and its focus:
4. Which training program/s is your organisation interested in?
 - ☐ Mediation (accreditation)
 - ☐ Conflict Coaching
 - ☐ Restorative Justice
 - ☐ Facilitating Effective Groups
 - ☐ Workplace Conflict Resolution
 - ☐ Tailored Training (please provide details of training needs below)
5. Number of staff to attend training:
6. Timeframe for delivery:
7. Duration of training (hours/days):



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8. Where would you prefer this training to take place? (Please note: DRB has a dedicated training facility, and we can also accommodate delivery of the training at your venue)

9. What is your organisation's training objectives and desired learning outcomes?

10. Have the participants received any prior training of a similar nature?

11. Any other comments or information: