

**Montgomery County Government**  
**Conflict Facilitation Process (CFP)**  
**RESOLUTION AGREEMENT**

**Request Number:**

**Department/Division:**

**Date, Time & Place of CFP Facilitation:**

**Participant One: Name & Position:**

**Participant Two: Name & Position:**

**Co-Facilitator 1:**

**Co-Facilitator 2:**

**MAIN ISSUE IDENTIFIED:**

Continues on Next Page>

**Did Facilitation Result in Resolution - Yes/No ?**

**RESOLUTION/AGREEMENT/NEXT STEPS (if needed):**

**Please include: Resolution Found and the Agreement between Parties or if no resolution, what are the recommended next steps - Training? Skill Building?**

**Agreed by (Name, Sign & Date):**

**Participant One:**

**Participant Two:**

**Co-Faciliator One:**

**Co-Faciliator Two:**