## **Restorative Contract**

Date of Meeting:
Disputants
Referral Source  Administrator Teacher Student Self Other:
Conflict Information What is the conflict about?
1. Did we recognize an injustice/violation? Yes No Other:  2. Did we recognize an injustice? No Other:
2. Did we restore equity? Yes No  Apology for injustices/violations: Yes No
Nothing beyond this meeting is necessary: Yes No Other:
3. Future Intentions (Agreement/Contract)
We agree to prevent this problem from happening again by:
Student Signatures:

## 4. Follow-Up Meeting We agree to meet again for a follow-up meeting. Follow-Up Meeting Date: Student Signatures: Follow-Up Results: