The College of Health and Human Services and Center for African Peace and Conflict Resolution at California State University, Sacramento, present a basic negotiation and mediation workshop, designed for diverse populations from:

- Community-based & non-governmental organizations (CBOs/NGOs)
- Public & private agencies
- Businesses
- Professional & trade unions, and educational institutions.

The workshop trains participants in various negotiation and mediation techniques, practice-applications, conflict assessment and problem-solving skills, and how to become conflict mediators. Special emphasis will be on inter-group, interpersonal, commercial, community and public policy disputes, and youth conflict mediation. The workshop is very interactive, with case role-plays, practical exercises, short lectures and case development.

The workshop will be held from 8:30 a.m. to 5 p.m. daily on the California State University, Sacramento campus.

June 16-20, 2003

8th Annual Summer Workshop on Conflict Resolution

Collaborative Negotiation & Mediation

June 16-20, 2003 • 8:30 a.m. - 5 p.m. daily • (40 hours)

The workshop teaches negotiation and mediation techniques, practice-applications, conflict assessment and problem-solving skills, and how to become conflict mediators. Special emphasis will be on inter-group, interpersonal, commercial, community and public policy disputes, and youth conflict mediation. The workshop is very interactive, with case role-plays, practical exercises, short lectures and case development.

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June 16-20, 2003
application & registration form

2003 Summer Workshop on Conflict Resolution
California State University, Sacramento

First Name
Middle Initial
Last Name

Mailing Address

Telephone
Fax

Present Position/Profession
Hobbies/special interests
Reason(s) for participating in workshop

Please check if you need

☒ Housing information  ☑ Other information (please specify below)

☒ A check/draft is enclosed for US$500 for tuition
Make checks/drafts (drawn on US bank) payable to CSUS Foundation/CAPCR

Please charge my ☐ MasterCard ☐ Visa

Card#
Name on card

Signature
Expiration date ________ Today’s date

Mail this form with fee to:
Professor Ernest Uwazie
CAPCR
California State University, Sacramento
6000 J Street, Sacramento, CA 95819-6085 USA

You will be notified of receipt of registration form & fee.
Space is limited for enrollment so register now!