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Columbia, MD 21046  
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**3 Easy Ways to Register!**

\*Fax: 410-381-1558

\* E-mail: [registration@mdworks.com](mailto:registration@mdworks.com)

\*Mail to: Maryland Works, Inc.

10270 Old Columbia Rd, Suite 100  
Columbia, MD 21046-1854

## Conflict Management

Wednesday, August 16, 2017

9:00 a.m. – 12 noon

Registration begins at 8:30 a.m.

This training will prepare staff and supervisors to assess and better manage interpersonal conflict in the workplace. The session is almost entirely experiential by requiring participants to examine their own role in preventing and resolving conflict. Participants will:

- Achieve a new understanding of differences in interactional styles and “bad habits” in communication with peers, supervisors and subordinates
- Practice a simple method of addressing interpersonal disagreement and conflict – past and present
- Learn practical approaches to agreement-making and conflict resolution

The session ends with each person’s self-assignment to improve their work life in a specific way and identify strengths and weaknesses in their approach to more effective working relationships.

**Presenter:** *Brent Toleman’s* career in the field of developmental disabilities spans nearly forty years working in direct care, case management, program management, behavior therapy, and staff training. He began that career at Providence Center in 1971, before joining the faculty of Georgetown University School of Medicine in its efforts toward the de-institutionalization of residents of Forest Haven in the mid -1980s. Completing the circle, he returned to Providence Center as Training Director, before leaving to create a consulting practice focused on professional development and training for non-profit organizations throughout the region.

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_ Email \_\_\_\_\_

Work Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_/\_\_\_\_/\_\_\_\_ Fax \_\_\_\_/\_\_\_\_/\_\_\_\_

**\_\_\_Member @ \$60.00** (\$55.00 for each additional attendee from the same agency)  
**\_\_\_Non-Member @ \$90.00**

**Method of payment:** \_\_\_ Visa \_\_\_ Mastercard \_\_\_ Check enclosed (payable to Maryland Works, Inc)

Card number \_\_\_\_\_ Exp \_\_\_\_\_ CSC Code \_\_\_\_\_ (3 digit code on back of CC)

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**ADA Accommodations** (please specify) \_\_\_\_\_ **Deadline for special needs is two weeks prior to program date**