

# Community Justice & Mediation Center

Case \_\_\_\_\_

## MEDIATION EVALUATION

We need your help to improve our mediation services. Please take a few minutes to fill out this form and return it to us. Circle the terms that apply and add your comments, if any. A stamped, self-addressed envelope is available if you cannot do this immediately following the mediation. Thank you for working with us in this mediation.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Intake

1. Did the mediator contact you promptly about your matter?

Very      Somewhat      Not adequately

Comment:

2. How well did the mediator explain mediation so that you could make an informed decision to agree to mediate?

Very      Somewhat      Not adequately

Comment:

3. How well did the mediator help you prepare to participate in mediation?

Very      Somewhat      Not adequately

Comment:

### Mediation

4. Was the mediation conducted fairly?

Very      Somewhat      Not adequately

Comment:

(over)

5. How comfortable did you feel participating in the mediation?

Very Somewhat Not adequately

Comment:

6. How well did the mediation bring out each party's viewpoints and concerns?

Very Somewhat Not adequately

Comment:

7. How well did the mediation help the parties develop solutions to the problem?

Very Somewhat Not adequately

Comment:

8. How satisfied are you with the result of the mediation?

Very Somewhat Not adequately

Comment:

9. How likely would you be to ask CJAM to help you with future problems?

Very Somewhat Not adequately

Comment:

10. How comfortable would you be recommending CJAM's services to a friend?

Very Somewhat Not adequately

Comment: