MEDIATION EVALUATION BY ATTORNEYS

(For Program Statistical Purposes Only)

Please promptly fill out this form after the mediation conferences and return it to the Families In Transition Program Administrator – Tulsa County Courthouse, 500 S. Denver, Tulsa, OK, 74103.

Name of Mediator(s):	Case No				
Case Name:					
Are you the: Plaintiff's AttorneyDefendant's Attorney				Other's Attorney	
Outcome: SettledPartially Se	ettled	Not S	Settled	Conti	nued
Please rate the following using: 1 – Poor 2 – Fair 3 – Good 4 – Verg				y Good 5 - Excellent	
	1-Poor	2- Fair	3-Good	4-Very Good	5-Excellent
1. During the introductory statement, how well did the mediator explain the mediation process to all parties?	1	2	3	4	5
2. How well did the mediator understand the FACTUAL issues involved in the case?	1	2	3	4	5
3. How well did the mediator understand the LEGAL issues involved in the case?	1	2	3	4	5
4. How well did the mediator ask appropriate questions to determine the facts of the case?	1	2	3	4	5
5. How well did the mediator clarify the key issues and interests of each party?	1	2	3	4	5
6. How well did the mediator help the parties generate realistic options to settle the case?	1	2	3	4	5
7. How well was the mediator able to resolve or facilitate impasses between the parties?	1	2	3	4	5
8. How was the tone, body language and demeanor of the mediator?	1	2	3	4	5
9. Overall, how satisfied were you that the mediator was impartial and treated both sides equally?	1	2	3	4	5
10. Overall how satisfied were you with the PROCESS of mediation?	1	2	3	4	5
11. Overall, how satisfied were you with the OUTCOME of the mediation?	1	2	3	4	5
12. Overall how satisfied were you with the MEDIATOR?	1	2	3	4	5

Please provide any comments you wish to make regarding the mediator or the mediation process on the back of this form.