

POST-MEDIATION SURVEY

Please take a moment to answer this brief survey. Your feedback is important to us.

Court File Number/Index number: _____ **Case Type:** _____

Please circle if you were: Petitioner/Plaintiff Respondent/Defendant

What was your role? ___ Party ___ Attorney ___ Support Person

Did you reach an agreement? Yes ___ No ___

If you did not reach an agreement, do you think you made progress? Yes ___ No ___ N/A ___

If more than one mediator, was the co-mediation experience positive? Yes ___ No ___ N/A ___

On scale of 1-5, please share your opinion about each statement below:	Strongly Disagree	Disagree	No Opinion/ Not Applicable	Agree	Strongly Agree
The mediator(s) clearly explained how mediation works.	1	2	3	4	5
The mediator(s) were neutral and fair.	1	2	3	4	5
I was able to explain my point of view and how I felt.	1	2	3	4	5
The mediator(s) listened to me and understood my concerns.	1	2	3	4	5
The mediator(s) helped me see the other party's point of view.	1	2	3	4	5
The mediator(s) helped me understand my own goals, options, or resources.	1	2	3	4	5
I was encouraged to come up with my own solutions.	1	2	3	4	5
I would recommend this mediator(s) to others.	1	2	3	4	5
I would recommend mediation to others.	1	2	3	4	5

Is there anything else you would like to tell us about the mediator(s) or your experience?

May we contact you within 6 months to follow up? **Yes** ___ **No** ___

Tel: () ___ - _____

Email: _____