

MEDIATION EVALUATION FORM

This form is used by the Community Dispute Resolution Center (CDRC) of Missoula County to gather feedback from the parties who participate in Justice Court mediations. The information will be reviewed by the CDRC Board to ensure the delivery of professional, fair, and respectful mediation services.

Name _____ Date _____

Select one: I am the Plaintiff ___ Defendant ___

I am an Attorney for the Plaintiff ___ Defendant ___

Have you participated in mediation before? Yes _____ No _____

Please respond to the following questions using the scale provided.

1- Strongly Disagree, 2-Disagree, 3-Neutral, 4- Agree, 5-Strongly Agree

The mediator(s) adequately described the mediation process. 1 2 3 4 5

The mediator(s) were helpful and knowledgeable. 1 2 3 4 5

The mediator(s) were impartial and fair. 1 2 3 4 5

I was provided an opportunity to be heard. 1 2 3 4 5

I felt comfortable bringing up my issues and concerns. 1 2 3 4 5

Decisions by the parties were made without coercion. 1 2 3 4 5

I would recommend using mediation to others. 1 2 3 4 5

I would use mediation to resolve disputes in the future. 1 2 3 4 5

Court ordered mediation is a good idea. 1 2 3 4 5

Additional observations, comments, or suggestions:

This form can also be filled out electronically and can be found at: cdrcmissoula.org



406-543-1157

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