

MEDIATION PARTICIPANT SURVEY

(Copies of the following evaluation form should be distributed to each person who attended as a party or representative in mediation, along with an envelope in which to return the evaluation form. The mediator should be told to gather the sealed envelopes and submit them to the ADR Program Director. Generally, the parties should be asked to complete the survey when mediation ends but before they leave the mediation site; however, a party who wishes to submit the form later may do so (provide an envelope addressed to the ADR Program Director).

To help NASA to continue to improve its ADR program and provide outstanding customer service, we would appreciate your taking a few minutes to answer the following questions. There is room at the end for comments, if you like. The information below is confidential and will be used solely for program evaluation purposes. It is not necessary to include your name unless you wish to do so.

In this mediation, I was the:

- Aggrieved Complainant
- Management representative
- A representative
- Other

Center where mediation occurred: _____

At which phase of the process is this mediation occurring?

- Pre Counseling Stage
- Formal Complaint Stage

The Process

1. a. Prior to mediation, the opportunity for mediation was:

- Fully explained to me
- Adequately explained to me
- Poorly explained to me
- Not explained at all to me

b. Prior to the mediation, the mediation process was:

- Fully explained to me
- Adequately explained to me
- Poorly explained to me
- Not explained at all to me

2. The mediation was scheduled within:

- 5-15 days of the initial complaint
- 16-25 days of the initial complaint
- 26-35 days of the initial complaint
- 36 or more days of the initial complaint

3. The mediator explained the mediation process to me in a way that allowed me to fully understand the process.

- Strongly Agree

- Agree
- Disagree
- Strongly Disagree

4. I had a full opportunity to present my views.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

5. If I had another dispute or problem like this one, I would want to try mediation to resolve it.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

6. I would recommend mediation to others at the Center.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

If you disagree, please provide more information.

The Mediator

Name(s) of mediator(s): _____

7. a. The mediator listened well.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

b. The mediator treated everyone fairly.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

8. The mediator remained neutral and impartial.
- Strongly Agree
 - Agree
 - Disagree
 - Strongly Disagree
9. The mediator worked with both sides to help reach a fair resolution.
- Strongly Agree
 - Agree
 - Disagree
 - Strongly Disagree
10. I was treated with respect during the mediation.
- Strongly Agree
 - Agree
 - Disagree
 - Strongly Disagree

The Result

11. Please circle the appropriate answer:

- a. Mediation is completed and we reached a resolution.
- b. Mediation is still open or continued.
- c. Mediation is completed, but we did not reach a resolution.

12. If you reached agreement, do you believe it is as fair and realistic as reasonably possible?

- Yes
- No

If no, why not? _____

13. If no agreement was reached, do you believe the mediation was still helpful?

- Very Helpful
- Somewhat Helpful
- Slightly Helpful
- Not Helpful

14. Do you have any comments that might help us improve this program?

Name and contact information (voluntary):

Thank you for taking your time to assist us in trying to continually improve our program.