

Shared Neutrals ADR Program (SNAP)

CO-MEDIATOR EVALUATION

Form G

To be completed by the Lead Mediator at end of a co-mediated session and shared with the Co-mediator. Submit this form to the Shared Neutrals ADR Program Coordinator.

SNAP Case # _____

Name of Lead Mediator:

Lead Mediator's Agency:

Name of Co-mediator:

Co-mediator's agency:

Federal Agency involved:

Date(s) of Mediation:

Length of mediation (in hours):

Case Results: Settlement No Settlement Partial Settlement

Evaluation (1 - poor; 2 - fair; 3 - good; 4 - excellent):

- | | | | | |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| 1. The Co-mediator explained the process in the opening statement. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 2. Analyzed, listened, and understood the issues of the case. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 3. Helped the parties generate realistic options. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 4. Helped the parties work through impasses. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 5. Gained the trust of the parties. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 6. Maintained a neutral and professional manner. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 7. Inspired confidence in the mediation process. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |
| 8. Honored confidentiality of both parties. | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> |

Overall evaluation of your Co-mediator:

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Is this individual ready to be a Lead or Senior Mediator? **Yes**

Why or why not?

What areas does (s)he need to focus on?

Additional Comments or Recommendations: