



Mediator Sign-Off Form

(Complete separate form for each session)

Mediation Date _____

- Written Mediation Agreement
- Verbal Mediation Agreement
- Additional Session Scheduled
- Pre-Mediation Caucus Used
- Supporting Supervisor Present

Mediator Comments

(such as: right parties present, process problems, adequate intake, program administration issues)

Mediators:

REMINDER: Did you debrief?

Beginning Time: _____
(include ½ hr. set-up time)

Observers: (actually present):

Ending Time: _____
(include time spent debriefing)

Total Mediator Time: _____

PLEASE SEE REVERSE TO PROVIDE MORE INFORMATION ABOUT THE PARTIES' PARTICIPATION TO HELP WITH INTERPRETATION OF OUR STATISTICS.

DID THE PARTIES DEMONSTRATE A WILLINGNESS/ABILITY TO:

Please check applicable boxes:

Party 1, Name:	Not at all	Somewhat	Significantly	Completely
Listen to the other person				
Consider other interests and points of view				
Acknowledge their own contribution to conflict				
Respond to mediator cues				
Modify their behavior during mediation				
Discuss ideas for an improved future				
Share relevant information				

Party 2, Name:	Not at all	Somewhat	Significantly	Completely
Listen to the other person				
Consider other interests and points of view				
Acknowledge their own contribution to conflict				
Respond to mediator cues				
Modify their behavior during mediation				
Discuss ideas for an improved future				
Share relevant information				

Party 3, Name:	Not at all	Somewhat	Significantly	Completely
Listen to the other person				
Consider other interests and points of view				
Acknowledge their own contribution to conflict				
Respond to mediator cues				
Modify their behavior during mediation				
Discuss ideas for an improved future				
Share relevant information				

If, over the course of joint session, you see a party consistently exhibiting “Not at all” behavior, consider caucusing, and if no improvement, end the session. Hold the hope, but do no harm.