

SAN MATEO COUNTY JUVENILE MEDIATION PROGRAM

Multi-Option ADR Project, MAP

Superior Court of San Mateo County

EVALUATION

Please return the completed evaluation by mail or fax to:
Juvenile Justice Mediation Program-SMC 303-JV
222 Paul Scannell Drive San Mateo, CA 94402
Telephone: (650) 261-5077

This ***confidential*** information is used to assess quality of the program, to provide feedback to the mediators and to make informed decisions regarding redesign of program procedures.

Ref. number: _____

Name (optional): _____

1. The mediation was fair.

-----1----- -----2----- -----3----- -----4----- -----5-----
Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree

2. It was helpful for me to attend the mediation.

-----1----- -----2----- -----3----- -----4----- -----5-----
Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree

3. I would recommend mediation to someone else with a child in this situation.

-----1----- -----2----- -----3----- -----4----- -----5-----
Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree

4. The mediation helped me feel that the justice system was more sensitive to my child's needs.

-----1----- -----2----- -----3----- -----4----- -----5-----
Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree

5. Mediation helped me to get answers to questions or concerns that I had about the crime and/or the other person. Yes _____ No _____

6. What, if any difference have you seen in your child since he/she participated in mediation?

7. What did you like most about the mediation?

8. What did you like least about the mediation?

9. Do you have other comments and/or suggestions?
