



International Mediation Institute

www.IMImediation.org

Feedback Request Form

This Feedback Request will take just a few minutes to complete

Every IMI Certified Professional Mediator has attained a high standard of professional competency in the practice of mediation. On completion of each mediation, the Mediator will invite the participants to complete this Feedback Request Form. Your feedback will:

- Help future users to have more information about working with this mediator
- Provide the mediator with an opportunity to know your perception of the mediation process on this occasion, how effective (s)he was, and why, and
- Enable the mediator's Peer Reviewer to prepare the Mediator's Feedback Digest, which is a professional requirement of all IMI Certified Mediators.

You may complete this Feedback Request Form in handwriting or electronic form (<http://www.imimediation.org/feedback-request-form>) and send it to the mediator's Reviewer (the mediator should provide you with an address for the Reviewer) or to the mediator directly, for forwarding to the Reviewer. The mediator will express a preference. As the Feedback Digest is prepared by the mediator's Reviewer, it should contain an objective and independent summary of the content of previously-submitted forms. The Feedback Digest may be relied upon by other parties in the future in deciding whether to appoint this mediator, so please try to be as fair and helpful as possible in providing your comments. Please try not to be influenced unduly by the outcome of your mediation but to focus on the mediator him/herself and on any particular contributions that (s)he may have made that you found to be especially important.

An example of Feedback completed by a Party in an actual case can be found at:

<http://www.imimediation.org/feedback-example>

The mediator's task is a challenging/important one. In your responses, please try to appreciate this and to be specific and constructive as possible. It would be helpful if you could include your name and details on the last page so that you can be contacted by the Reviewer in the unlikely event that clarification is needed. Please be assured that your information, and any information about the mediator will remain confidential and will not be provided to third parties.

FEEDBACK

Name of Mediator: _____

Mediation Organization (if any): _____

Start Date of Mediation: _____

End date of Mediation: _____

Place of Mediation: _____

Nature of mediated matter: _____

Please check the appropriate boxes below, and add any comments you wish to make.

Summary Questions

1. On a scale of 1-5 (1 = low; 5 = high), how likely are you to use this mediator again?

1 2 3 4 5 Not Applicable

Comment: _____

2. Would you recommend this mediator to others?

Yes No Not sure

Comment: (If Yes, why? If No, why not?) _____

3. On a scale of 1-5 (1 = low; 5 = high), how would you rate the mediator's skill and ability?

1 2 3 4 5 Not Applicable

Comment: _____

Specific Questions

4. How did you identify or appoint this mediator?

- a. IMI web portal
- b. Suggested by a colleague, law firm or other professional
- c. Appointed by an institution
- d. Suggested by one of the other parties
- e. Other _____

5. If you perceive that the mediator's skills made a decisive difference in the outcome or proceeding of the mediation process, which particular skills were they?

Comment: _____

6. How satisfied are you with the costs of the mediator?

(1=very dissatisfied; 2=dissatisfied; 3=neutral; 4=satisfied; 5=very satisfied)

1 2 3 4 5 Not Applicable

Comment: _____

7. How do you rate your overall satisfaction with the mediation process and the result obtained by the parties?

(1=very dissatisfied; 2=dissatisfied; 3=neutral; 4=satisfied; 5=very satisfied)

1 2 3 4 5 Not Applicable

Comment: _____

8. If a dispute resolution organization was involved in the selection and appointment of the mediator, please indicate how you rate your overall satisfaction with that body's support of the dispute resolution process?

(1=very dissatisfied; 2=dissatisfied; 3=neutral; 4=satisfied; 5=very satisfied)

1 2 3 4 5 Not Applicable

Comment: (please identify the organization if you think it appropriate to do so):

9. Did you resolve most of your issues as a result of the mediation?

Yes No

Independently of whether the mediation resulted in a resolution, what was worthwhile about participating in mediation?

Comment: _____

10. Was this your first experience with the mediation process?

Yes No

11. Are you willing to be mentioned as a reference on this mediator's IMI Profile on the IMI web portal?

Yes No

12. Any other comments?

Comment: _____

Your responses on this form will be treated as confidential information by the Reviewer and by the mediator, but may be referred to in an anonymous form (ie. without any reference to the parties or any other information identifying you or your mediation) in the mediator's Feedback Digest on the IMI web portal.

Thank you for completing this Feedback Request. It will help others in the future.

If you are willing to disclose your name and contact details, please do so below:

Name: _____

Organization: _____

Position: _____

Phone: _____

Email: _____