



Participant Evaluation for SEMS Mediation

1. Date of Session
2. School or ISD
3. My Role
 - a. Parent/Guardian
 - b. Student
 - c. Local District Staff
 - d. ISD Staff
 - e. Advocate
 - f. Attorney for District
 - g. Attorney for Family
 - h. Other
4. Please indicate your agreement with the following statement
 - a. The time, attention and information I received prior to mediation was helpful
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
 - b. The mediator was neutral and did not take sides
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
 - c. The mediator encouraged open communication and balanced participation.
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
 - d. I had an opportunity to express my concerns and offer solutions to the issues.
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree

- e. The mediator helped clarify and prioritize concerns.
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
- f. The participants were encouraged to offer their own solutions and to determine the outcome of the mediation
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
- g. The mediator used time well and kept the meeting focused
 - i. Strongly agree
 - ii. Agree
 - iii. Neutral
 - iv. Disagree
 - v. Strongly disagree
 - vi.
- 5. What was most beneficial during this mediations?
- 6. Is there something the mediator could have done differently?
- 7. Considering your recent experience with SEMS' mediation, would you use this service?
 - a. Yes
 - b. No
 - c. Additional Comments
- 8. What was your overall impression of SEMS' mediation service?
- 9. If you have additional feedback about your recent experience, please email: info@mikids1st.org