Department of Veterans Affairs									
MEDIATION PROCESS ASSESSMENT - MEDIATOR/NEUTRAL									
CASE NUMBER CHECK APPROPRIATE BOX WHICH BEST IDENTIFIES YOUR ROLE IN THE PROCESS									
OTHER (Explain)									
MEDIATION OVERVIEW AND ASSESSMENT OF THE PROCESS									
ITEM								YES	NO
1	I explained the mediation process and roles to both parties. I was adequately notified of the logistics (directions, equipment, parties, issues).								
2	The mediation environment (room temperature, seating, etc.) was comfortable.								
4	The Agreement to Mediate form was available for the mediation session.								
5	The settlement agreement language (with age addendum, if applicable) was available.								
6									
7									
QUESTIONS 8 through 11 ONLY APPLY TO CO/MENTEE MEDIATORS									
8	The Lead/Mentor Mediator contacted me prior to the day of the mediation session.								
9	The Lead/Mentor Mediator spent time with me to discuss the mediation plan.								
10	The Lead/Mentor Mediator provided follow up feedback after the mediation session.								
11 I learned more about mediation from working with the Lead/Mentor Mediator.									
DATE OF FIRST TOTAL NUMBER OF HOURS DATE MEDIATION PROCESS WAS RESOLUTION NON-MONETARY TERMS (Describe) MEDIATION SESSION LASTED CONCLUDED REACHED									
					YES				
LUMP SUM		ВАСКРАҮ	ATTORNEY'S FEES		IPENSATORY IAGES	AWARD	ANNUAL	SICK LE (Hours)	AVE
					AGEO		LEAVE (Hours)	(Hours)	
\$		\$	\$	\$		\$			
OTHER (Describe)									
COMMENTS									