Clear Form

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
http://www.courts.state.nh.us

Court Name: New Hampshire Supreme Court

Case Name: _____

Case Number: _____
(if known)

APPELLATE MEDIATION QUESTIONNAIRE

MEDIATOR _____

DATE OF MEDIATION _____

1. Mediation had the following impact on this case: (Fill all that apply)

   ○ settled the case ○ little or no impact

   ○ allowed the parties to better understand each other

2. What did the mediator do well during your mediation session?

   _____

   _____

3. What could the mediator have done better during the mediation session?

   _____

   _____

4. What do you like about the mediation program?

   _____

   _____

5. How would you change the mediation program?

   _____

   _____

6. Please provide any other comments you think would be helpful in evaluating the effectiveness and quality of the mediator or the mediation process.

   _____

   _____

Please place completed questionnaire in sealed envelope and return to
New Hampshire Judicial Branch Administrative Offices
Attention: Appellate Mediation Program
1 Granite Place, Suite N400
Concord NH 03301

Top of Page