Program Utility Documents for Administering and Evaluating Your Mediation Program

Case #: _________________________________

School Mediation Intake Form

Date: _________________________  Intake Person (Initials): ______________

<table>
<thead>
<tr>
<th>Initiating Party</th>
<th>Grade:</th>
<th>Sex (circle): M F</th>
<th>Age (in years):</th>
<th>Race:</th>
<th>Has Party Used Mediation Before? (please circle): Y N</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>African-American</td>
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<td>Hispanic</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Responding Party</th>
<th>Grade:</th>
<th>Sex (circle): M F</th>
<th>Age (in years):</th>
<th>Race:</th>
<th>Has Party Used Mediation Before? (please circle): Y N</th>
</tr>
</thead>
<tbody>
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<td></td>
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<td></td>
<td></td>
<td>Hispanic</td>
</tr>
</tbody>
</table>

**Dispute Referred By**<br>(check most appropriate answer):
- Teacher
- Other Student
- Principal or Administrator
- Counselor
- Discipline or Security
- One of Parties

**Nature of Dispute**<br>(check most appropriate answer):
- Physical Fighting
- Verbal Disagreement
- Rumors
- Property and/or Money
- Truancy
- Other Inappropriate Behavior

**Presenting Problem**<br>(describe the problem that brought the parties to mediation):

________________________________________________________________________
________________________________________________________________________

Comments:
Was Mediation Scheduled? Yes ________ No ________

If Yes, Date Scheduled: ________________________

Co-Mediators Assigned: ________________________

________________________________________
Case #: __________________________

School Mediation Agreement Form-Elementary

Date: _______________ Co-Mediators: (1) __________________________

(2) __________________________

First
Student (Name) ____________________________________________

Grade: _______________ Are they a boy or a girl? (circle): Boy Girl

Other
Student (Name) ____________________________________________

Grade: _______________ Are they a boy or a girl? (circle): Boy Girl

Did they make an agreement? Yes _________ No __________

Statement of Agreement:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

First Student ____________________ Other Student ____________________

Mediator ________________________ Mediator __________________________

Case #: __________________________
School Mediation Agreement Form -Secondary

Date:_______________  Co-Mediators: (1) ___________________________________
(2) ___________________________________

Initiating Party
(Name)_______________________________________________
Grade: _______________      Sex (circle):   M      F           Age (in years):_____________

Responding Party
(Name)_______________________________________________
Grade: _______________      Sex (circle):   M      F           Age (in years):_____________

Was an agreement reached in this mediation?  Yes _________    No __________

Statement of Agreement:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Initiating Party ____________________ Responding Party _____________________
Mediator _________________________ Mediator ____________________________

Case #: __________________________________

**School Mediation Follow-Up Form**

Date of Mediation: ___________  Date of Follow-Up: _________________

Which Follow-up Is This?  2 week Follow-Up________  2 month Follow-Up________

Follow-Up Done By (put initials): __________________________

Was an Agreement Reached in This Mediation?   Yes ________     No ________

**Initiating Party:**

<table>
<thead>
<tr>
<th>Grade: ____________</th>
<th>Sex (circle): M F</th>
</tr>
</thead>
<tbody>
<tr>
<td>(circle one)</td>
<td></td>
</tr>
</tbody>
</table>

This disputant was satisfied not satisfied with the results of the mediation.
The conflict has has not been resolved.
The agreement has has not been followed for the most part.
The disputant has has not had further conflict with the other since mediation.
The disputant has has not used mediation since this case.

**Responding Party:**

<table>
<thead>
<tr>
<th>Grade: ____________</th>
<th>Sex (circle): M F</th>
</tr>
</thead>
<tbody>
<tr>
<td>(circle one)</td>
<td></td>
</tr>
</tbody>
</table>

This disputant was satisfied not satisfied with the results of the mediation.
The conflict has has not been resolved.
The agreement has has not been followed for the most part.
The disputant has has not had further conflict with the other since mediation.
The disputant has has not used mediation since this case.

Comments:

________________________________________________________________________
________________________________________________________________________
ROLE PLAY OBSERVATION SHEET

Observer: ______________
Date of Observation: ________________________
School: ___________________________________
Day of Training: 1  2  3  4 (or approximate timing of observation, e.g. beginning, middle, end): _______________________________
Trainers: __________________________________

Mediator 1:   Sex _____   Race _____ Grade _____
Mediator 2:   Sex _____   Race _____ Grade _____
Disputant 1:  Sex _____   Race _____ Grade _____
Disputant 2:  Sex _____   Race _____ Grade _____

Topic of Dispute Role Play _________________________________________

For each of the following stages of the mediation process, indicate whether you think the skills were performed very well to very poorly on a scale of 1 to 5 (i.e., very well = 5, well = 4, medium = 3, poorly = 2, very poorly = 1). Also, please comment specifically on the reasons you rated as you did. Note the specific behaviors that were or were not performed adequately. Use checklists for guidance and prompting.

OPENING STATEMENT:

Introductions 1 2 3 4 5
Description of Mediation 1 2 3 4 5
Explanation of Mediator’s Role 1 2 3 4 5
Explanation of Groundrules 1 2 3 4 5
Explanation of Confidentiality 1 2 3 4 5
Handling Questions 1 2 3 4 5

OVERALL 1 2 3 4 5

Comments:

FACT-FINDING

Ability to Gather Information 1 2 3 4 5
Maintaining Groundrules 1 2 3 4 5
Identifying Parties’ Interests 1 2 3 4 5
Active Listening 1 2 3 4 5
Summarizing Parties’ Statements 1 2 3 4 5

OVERALL 1 2 3 4 5

Comments:

CAUCUSING: Were caucuses used? yes no
Explanation of Caucusing 1 2 3 4 5
Ability to Gather Information 1 2 3 4 5
Summarizing Parties’ Statements 1 2 3 4 5
Maintaining Confidentiality 1 2 3 4 5

OVERALL 1 2 3 4 5

Comments:

FINDING SOLUTIONS:

Brainstorming 1 2 3 4 5
Evaluating Solutions 1 2 3 4 5
Helping Parties Negotiate 1 2 3 4 5
Summarizing 1 2 3 4 5

OVERALL 1 2 3 4 5

Comments:

PREPARING AGREEMENT

Keeping Agreement Balanced 1 2 3 4 5
Making Agreement Specific 1 2 3 4 5
Planning for “What-Ifs” 1 2 3 4 5
Summarizing Agreement 1 2 3 4 5

OVERALL 1 2 3 4 5

Comments:

Mediation Training Evaluation - Staff

1. Your school: ________________________________

2. Your job title: ________________________________

3. Staff ID: ________________________________

4. If you are a teacher:
   Grade you teach (please circle):  K  1  2  3  4  5  6  7  8  9  10  11  12
   How long have you been a teacher? (please put number of years): ________________

5. Your sex (please circle)  M   F

6. Your age (years): ________________

7. Your race (check one):  African-American ______  Caucasian ______  Asian ______
   Hispanic ______  Native American ______ Inter-racial ______

Use this scale to rate how much you agree with each of the following statements:

- SA = Strongly Agree
- A = Agree
- D = Disagree
- SD = Strongly Disagree
- NA = Not Applicable to this Training

Circle one response for each:

8. The training manuals were easy to follow.  SA   A   D   SD   NA
9. The training manuals covered all information I needed about mediation.  SA   A   D   SD   NA
10. The mediation trainers explained all mediation procedures clearly.  SA   A   D   SD   NA
11. The mediation trainers answered all questions to my satisfaction.  SA   A   D   SD   NA
12. The mediation trainers provided opportunities for persons to express their views about mediation.  SA   A   D   SD   NA
13. The trainers gained my trust and confidence.  SA   A   D   SD   NA
14. In general, the training included enough time to practice skills in resolving conflict.  SA   A   D   SD   NA
15. In general, the training enhanced my own skills for resolving conflicts.  SA   A   D   SD   NA
16. The training did a good job of preparing me to mediate conflicts.  SA   A   D   SD   NA
17. The training did a good job of preparing me to supervise students who will be mediating conflicts.  SA   A   D   SD   NA

18. Was anything NOT covered in training that you wish had been covered?

19. Is there anything you would suggest to improve the training?

The following questions ask about the training you received in methods for implementing a peer mediation program. If you have not yet received this training please leave these items unanswered.

1. The trainers provided good ideas for publicizing the mediation program throughout the school.  
   SA  A  D  SD  NA

2. I feel that I will be able to help explain mediation to other teachers and staff members in the school.  
   SA  A  D  SD  NA

3. The trainers provided suggestions for structuring follow-up meetings with the mediators to keep them active and able to mediate.  
   SA  A  D  SD  NA

4. The training did a good job of explaining how to do intake procedures for mediation  
   SA  A  D  SD  NA

5. The training provided me with information about keeping records of the mediations and agreements.  
   SA  A  D  SD  NA

6. In general, the training did a good job of preparing me to implement an effective peer mediation program in my school.  
   SA  A  D  SD  NA

7. Was anything NOT covered in the mediation program implementation training that you wish HAD been covered?

8. Is there anything you would suggest to improve the mediation program implementation training?
Mediation Training Evaluation – Student Secondary

Your feedback on this mediation training is very important to us. We’d like to know what you thought of the peer mediation training you just completed. Please complete all of the following questions.

1. Your sex: M______    F_______
2. What grade are you in? (please circle):     3    4    5    6    7    8    9    10    11    12
3. How old are you? (years): ____________
4. Your race (check one): African-American_______ Caucasian_______ Asian_______
   Hispanic_______ Native American_______ Inter-racial_______

Use this scale to rate how much you agree with each of the following statements:

SA = Strongly Agree
A = Agree
D = Disagree
SD = Strongly Disagree
NA = Not Applicable to this Training/Undecided

Circle one response for each:

6. The training manuals were easy to follow. SA A D SD NA
6. The training manuals covered all information I needed about mediation. SA A D SD NA
7. The mediation trainers explained all mediation procedures clearly. SA A D SD NA
8. The mediation trainers answered all questions to my satisfaction. SA A D SD NA
9. The mediation trainers provided opportunities for persons to express their views about mediation. SA A D SD NA
10. The trainers gained my trust and confidence. SA A D SD NA
11. In general, the training included enough time to practice skills in resolving conflict. SA A D SD NA
12. In general, the training enhanced my own skills for resolving conflicts. SA A D SD NA
13. The training did a good job of preparing me to mediate conflicts. SA A D SD NA
14. Was anything NOT covered in training that you wish had been covered?

________________________________________________________________________
________________________________________________________________________

Mediation Training Evaluation – Student Elementary

What grade are you in?: 3 4 5 6

Circle one response for each:

1. The training manuals were easy to follow.
   YES yes no NO

2. The mediation trainer explained the mediation process clearly.
   YES yes no NO

3. The mediation trainer answered all my questions well.
   YES yes no NO

4. The trainer gained my trust.
   YES yes no NO

5. The training gave me enough time to practice mediation.
   YES yes no NO

6. In general, the training helped me handle conflicts better.
   YES yes no NO

7. The training did a good job of preparing me to mediate conflicts.
   YES yes no NO

Mediators’ Feedback Form –Secondary

Co-Mediation should work together to answer this form. Complete one form per mediation. Please answer each of the following questions in terms of your feelings about the mediation you have just completed.

Co-Mediator #1:
Grade: _______________   Sex (circle):   M      F

Co-Mediator #2:
Grade: _______________   Sex (circle):   M      F

Date of Mediation: ____________________

Was an agreement reached in this mediation?   Yes ________   No ________

Did you caucus during the mediation?   Yes ________   No ________

Was the mediation held in a private place?  Yes ________   No ________

Did both(all) parties agree to mediate?  Yes ________   No ________

Did you explain the mediation process?  Yes ________   No ________

Did you explain confidentiality?   Yes ________   No ________

If an agreement was reached did you complete an agreement form?     Yes ________   No ________

Please answer the following in terms of the extent to which you agree or disagree.

<table>
<thead>
<tr>
<th>SA = Strongly Agree</th>
<th>A = Agree</th>
<th>D = Disagree</th>
<th>SD = Strongly Disagree</th>
<th>U = Undecided</th>
</tr>
</thead>
</table>

1. We worked well together as co-mediators.   SA A D SD U
2. The parties gave a sincere effort in mediation.   SA A D SD U
3. We had difficulty helping the parties explain their sides of the situation.   SA A D SD U
4. We did not act in a biased way toward either party.   SA A D SD U
5. The parties were unable to come up with their own ideas for solving the problem.   SA A D SD U
6. We gained the parties’ trust.   SA A D SD U
7. We could have done a better job of caucusing with the parties.   SA A D SD U
8. Overall the parties were very satisfied with the outcome of the mediation.   SA A D SD U
9. Overall the parties were very satisfied with the process of mediation.   SA A D SD U

Mediators’ Feedback Form - Elementary

CO-MEDIATORS ANSWER THESE QUESTIONS TOGETHER. HOW DID YOU FEEL ABOUT THE MEDIATION YOU JUST DID?

Co-Mediator #1: Name: ____________________________
Grade: _____________   Boy or Girl? (circle):   Boy    Girl

Co-Mediator #1: Name: ____________________________
Grade: _____________   Boy or Girl? (circle):   Boy    Girl

Date of Mediation: ____________________________

Did you caucus during the mediation?   Yes ________   No ________
Was the mediation held in a private place?   Yes ________   No ________
Did you explain the mediation process?   Yes ________   No ________
Did you explain confidentiality?   Yes ________   No ________

1. We worked well together as co-mediators.   YES      Yes      No      NO
2. The parties really tried to work things out.   YES      Yes      No      NO
3. The parties had trouble telling their sides of the story.   YES      Yes      No      NO
4. We were fair with both parties.   YES      Yes      No      NO
5. We gained the parties’ trust.   YES      Yes      No      NO
7. We could have done a better job of caucusing.   YES      Yes      No      NO
8. The parties were very happy with the mediation.   YES      Yes      No      NO

Parties’ Feedback Form -Secondary

Please answer each of the following questions in terms of your feelings about the mediation you have just completed.

1. Name: ______________________________________________________
2. Grade: _______________ 3. Sex (circle): M F
4. Date of Mediation: ________________
5. You Were: Initiating Party _____ Responding Party _____
6. Was an agreement reached in this mediation? Yes __________ No __________
7. Did you caucus (meet with the mediators alone without the other party) in the mediation? Yes _______ No _______

Please answer the following in terms of the extent to which you agree or disagree.

<table>
<thead>
<tr>
<th>SA = Strongly Agree</th>
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<th>D = Disagree</th>
<th>SD = Strongly Disagree</th>
<th>U = Undecided</th>
</tr>
</thead>
</table>

8. The mediators helped us state our sides of the situation.     SA A D SD U
9. I feel like I understand the other party’s needs and feelings better now than before mediation. SA A D SD U
10. The mediators explained the mediation process clearly.        SA A D SD U
11. The mediators explained confidentiality.                       SA A D SD U
12. The mediators were biased in favor of the other party.         SA A D SD U
13. Mediation helped me think of more options for settling the problem. SA A D SD U
14. The mediators gained my trust.                                 SA A D SD U
15. Caucusing did not help me handle the conflict more effectively. SA A D SD U
16. Mediation was worth the effort.                                SA A D SD U
17. Overall I’m very satisfied with the outcome of the mediation.  SA A D SD U
18. Overall, I think the other party is very satisfied with the outcome of the mediation. SA A D SD U
19. I will use mediation again.                                    SA A D SD U
20. I will recommend mediation to my friends.                      SA A D SD U
21. I’d like to become a peer mediator.                           SA A D SD U

Parties’ Feedback Form - Elementary

Please tell how you feel about the mediation you just did.

Your Name: ____________________________________________________

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<tbody>
<tr>
<td>1. The mediators helped me tell my side of the story.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2. Mediation helped me understand how the other person feels.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3. The mediators let me know what would happen in mediation.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4. The mediators told us about confidentiality.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5. The mediators treated one of us better than the other.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6. Mediation helped me think of good ways to handle the problem.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7. I trusted the mediators.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8. Mediation was worth the effort.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9. I am very happy that I went to mediation.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10. I will use mediation again.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>11. I will tell my friends to use mediation.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>12. I want to be a peer mediator.</td>
<td>YES</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
