

TO BE RETURNED TO SHARING NEUTRALS

MEDIATION REPORT

Sharing Neutrals: A Federal Interagency Mediation Program

INSTRUCTIONS FOR LEAD MEDIATOR: PLEASE COMPLETE AND RETURN TO SHARING NEUTRALS VIA EMAIL TO KIMBERLY FREEMAN (kimberly.freeman@hhs.gov) OR FAX (202) 691-2125.

Sharing Neutrals Case #:

Requesting Agency:

AGENCY Coordinator:

MEDIATION DATE:

LEAD MEDIATOR:

CO-MEDIATOR:

OUTCOME OF MEDIATION

Mediation Outcome: Resolved [] Not Resolved [] Pending [] Discontinued []

Was a verbal or written resolution agreement achieved? Yes [] No []

Did you and your co-mediator debrief at the close of mediation? Yes [] No []

Any additional comments?

EVALUATION OF CO-MEDIATOR

The co-mediator understood mediation.

Strongly Disagree Disagree Neutral Agree Strongly Agree

The co-mediator participated.

Strongly Disagree Disagree Neutral Agree Strongly Agree

The co-mediator is ready to be a lead mediator.

Strongly Disagree Disagree Neutral Agree Strongly Agree

What did the co-mediator do well?

What areas need improvement?

Any additional comments?

LEAD MEDIATOR

DATE

Thank you for your support!