

## Co-Mediator Evaluation Form

Your Name:

Co-Mediator's Name:

- 1) I met and/or spoke with my co-mediator on the following dates:
  
- 2) Please share any additional information regarding your interactions with your co-mediator.
  
- 3) I think my co-mediator's strengths are:
  
- 4) I think my co-mediator could improve by:
  
- 5) I would recommend my co-mediator to others.

Not at all

Somewhat

Highly

Very Highly

Please explain your answer:

- 6) Please share any ideas for how we can improve the EDNY Mediator Incubator.