FORECLOSURE DIVERSION PROGRAM
Maine Administrative Office of the Courts
P.O. Box 4820
Portland, ME 04112

Exit Survey
MEDIATION

Name of Mediator: Date of Mediation:

I am: ☐ Plaintiff ☐ Plaintiff's Attorney ☐ Defendant ☐ Defendant's Attorney

Name and contact information (Optional):

1. Please indicate the extent to which you agree with the following statements:

   a. The mediator explained the process so that I knew what to expect during the mediation session.

   ○ Strongly Agree ○ Agree ○ Not Sure ○ Disagree ○ Strongly Disagree

   b. The mediator was fair.

   ○ Strongly Agree ○ Agree ○ Not Sure ○ Disagree ○ Strongly Disagree

   c. I was satisfied with the way the mediator handled the case.

   ○ Strongly Agree ○ Agree ○ Not Sure ○ Disagree ○ Strong Disagree

   d. Mediation helped us explore different ideas to resolve the case.

   ○ Strongly Agree ○ Agree ○ Not Sure ○ Disagree ○ Strongly Disagree

   e. I was satisfied with the outcome of the mediation session.

   ○ Strongly Agree ○ Agree ○ Not Sure ○ Disagree ○ Strong Disagree

2. Mediation had the following impact on this case:

   ○ Settled the case ○ No impact
   ○ Settled some of the issues ○ Other
   ○ Moved the case toward settlement

3. Please use this space and/or the back of this form to share any other comments about your experience.

If you wish to comment further on your experience, please contact:
Lauren Blake Weliver, Manager of the Foreclosure Diversion Program, at 822-0706 or at FDMP@maine.gov.

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