



**SUPERIOR COURT OF CALIFORNIA, CONTRA COSTA COUNTY
ALTERNATIVE DISPUTE RESOLUTIONS PROGRAM OFFICE**

We value your comments — Thanks for taking 5 minutes to complete this survey!

Please email this form to: adrweb@contracosta.courts.ca.gov, fax (925) 608-2109 or mail:

ADR Program, P.O. BOX 911, Martinez, CA 94553

NEUTRAL CASE EVALUATION SURVEY

Case Name: _____ Case No.: _____

1. Please tell us your relationship to this case.

- Plaintiff** (*person filing lawsuit*) **Defendant** (*person being sued*) **Other** _____
 Counsel for Plaintiff **Counsel for Defendant** (*Please specify – e.g.: claims rep*)

2. Please check the box next to the best answer for each question.

a. Did neutral evaluation give you a new perspective on your case? YES NO

If yes, did you use the information to resolve some or all issues?

If no, do you plan to:

- continue the case in court?
 request another ADR process?

b. Were you able to explain your case fully? YES NO

c. Do you think the evaluator understood the important issues? YES NO

d. Did neutral evaluation lower the cost of resolving this case? YES NO

e. Did neutral evaluation reduce the time needed to resolve this case? YES NO

f. Did neutral evaluator suggest ways to resolve this case? YES NO

g. Was the neutral evaluator fair? YES NO

3. How would you rate this evaluation experience?

- Excellent Good Fair Poor

4. Was the referral to neutral case evaluation:

- Too early About right Too late

5. How would you rate the evaluation of your case?

- Excellent Good Fair Poor

6. Have you used neutral evaluation before?

- Yes No How frequently? _____

7. How did this experience compare to other disputes where you did not use neutral evaluation?

- Much better Better About the same Worse Doesn't apply

8. Would you use neutral evaluation again or recommend it to others?

- Yes No

Do you have comments or suggestions?

