

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA
ADR PROVIDER'S STATEMENT/CIVIL DIVISION**

PLEASE MAIL WITHIN 10 DAYS OF THE COMPLETION OF THE ADR PROCESS TO:
LAURIE MIKKELSEN, ADR ADMINISTRATOR
SANTA CLARA COUNTY SUPERIOR COURT
191 N. FIRST STREET, SAN JOSÉ, CA, 95113
OR FAX TO 408-882-2595 OR EMAIL ADR@SCSCOURT.ORG

Please complete this statement without breaching confidentiality.

Case Name: _____ **Case No:** _____

Your Name: _____ **Your Phone Number:** _____

ADR Process: Mediation Neutral Evaluation Other (specify): _____

Type of case:

- | | | |
|---|--|--|
| <input type="checkbox"/> Banking | <input type="checkbox"/> Health Care | <input type="checkbox"/> Partnership Disputes |
| <input type="checkbox"/> Business/Contract | <input type="checkbox"/> Housing | <input type="checkbox"/> Personal Injury |
| <input type="checkbox"/> Civil Rights | <input type="checkbox"/> Intellectual Property | <input type="checkbox"/> Probate - Wills |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Insurance | <input type="checkbox"/> Professional Negligence |
| <input type="checkbox"/> Defamation | <input type="checkbox"/> Labor - Employment | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Disabilities | <input type="checkbox"/> Landlord/Tenant | <input type="checkbox"/> Securities |
| <input type="checkbox"/> Elder Issues/Abuse | <input type="checkbox"/> Medical Malpractice | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Environment | <input type="checkbox"/> Neighborhood | <input type="checkbox"/> Other (specify) _____ |

Preparation time: ____ hours **Total length of ADR sessions:** ____ hours **No. of sessions:** _____
Total fee for ADR process for all parties (include any charges for administration, preparation, travel, etc.):
\$ _____

How did the case resolve?

- Full resolution Partial resolution No resolution
 Other (specify): _____

The case did not fully resolve because:

- Additional discovery was necessary An essential party did not participate
 One or more of the parties did not have authority to settle The parties reached an impasse
 Other (specify): _____

For Mediators Only:

- Was your primary style in this case Facilitative Directive/Evaluative
Did the parties or counsel ask about the law? Yes No
Did you discuss the relevant law? Yes No

For Neutral Evaluators Only:

- Following your evaluation did you:
Conduct a mediation? Yes No
Conduct a settlement conference? Yes No
Provide case management assistance? Yes No Specify: _____

Did you give evaluation forms to the parties and counsel? Yes No

Comments on any of the above matters or on administration of the ADR program:

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