UT Mediation Clinic and The Community Mediation Center

Family Mediation Training



17, 18 and 24, 25 January 2014

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Evaluation Family Mediation Training

(Score 1 as the lowest rating and 5 as the highest rating.)

1.	Overal Evalua		his traini 1	ng inforr	mative? 2	3		4		5
2	Were t	he traii	ners ahle	to comr	municate the	e informat	tion effec	tively?		
Evaluat		1	iici 3 abic	2	3	c illioillia	4	cively:	5	
3.	Was th	ne traini	ing manı	ual easv t	to use and re	ead?				
Evaluat		1		2	3		4		5	
Please	give spe	ecific fe	edback a	bout the	manual (th	ings that v	worked, tl	hings you	'd change	e):
4.		n major nely use	_	y below,	indicate hov	w useful tl	ne trainin	g was for	you. (Sc	ore 1 as not useful at all and 5 as
	a.	Overv	iew of B	asic Med	liation Proce	ess and Te	chniques:			
Evaluat	Evaluation:			2	3		4		5	
	b.	Unde	rstandin	g the Par	enting Plan:					
Evaluation:		1		2	3		4		5	
	c.	Rule 3	31 Standa	ards and	Procedures	, including	Ethics:			
Evaluat	ion:	1		2	3		4		5	
5.		there er yes	nough br	eaks?	n	o				
6.	Was th		flow" to	the train	ing sessions		t you wer	e led effe	ectively fr	rom one concept to another?
7.		ne time ong enc		for the t	_	ons long e	_		e informa	ation adequately?



8. What was the most	important thing you gained from this training?							
9. What was the least	important thing you gained from this training?							
10. What would have m	ade the training better?							
11. Please share any additional comments about the instructors or the workshop.								
Name of instructor	Comment:							
12. What further media	tion training would you like to have?							