

Case Number:	LEA:	
Facilitator: Burton	Facilitation Date:	
Evaluator:	Parent(s)	
		-

Thank you for participating in the resolution meeting process. We ask that you take a few minutes to complete this evaluation as it is important for the Office for Dispute Resolution (ODR) to receive your feedback.

Resolution Meeting Facilitation Evaluation Questionnaire

1. With regard to ODR, please indicate your satisfaction with the staff explaining the facilitation procedures, contacting the parties and scheduling the facilitation.

	nk about the facilitator in your case. Circle a response which represents your opinior e following questions.						
Did the facilita	tor explain						
	olution process	Yes	Undecided	Na			
his/her	role in facilitation	Yes	Undecided	Na			
each pa	arty's role in facilitation	Yes	Undecided	Na			
Comments:							
Did the facilita	tor						
listen t	o your concerns	Yes	Undecided	Ne			
unders	tand the issues	Yes	Undecided	Na			
treat ye	bu with respect	Yes	Undecided	No			
help yo	ou clarify and prioritize your concern	Yes	Undecided	Na			
Comments:							
Did the facilita	tor foster an environment where						
ideas a	nd concerns could be shared	Yes	Undecided	Na			
mutual	respect and understanding were encouraged	l Yes	Undecided	Na			
the par	ties could work together to develop solution	s Yes	Undecided	No			
anger a	and tension could be expressed constructivel	v Yes	Undecided	Ne			

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	If the parties had difficulty developing solutions, did the facilitator help the parties move past serious differences clarify information	Yes Yes	Undecided Undecided	No No
	comments:	Yes		No
6.	Is an IEP, IFSP or service agreement meeting scheduled to according the facilitation agreement? Comments:	Yes	Undecided	
7.	Would you contact ODR and request facilitation services for an disputes? Comments:	Yes	Undecided	on No
	As a result of this facilitation, do you feel that you have establish other party, a better understanding of their concerns, and be able constructively in the future? Comments:	to discu Yes	ss issues more o <i>Undecided</i>	
9.	Overall, how satisfied were you with the results of facilitation? Very Satisfied Satisfied Very Dissatisfied Neutral	Dissatisf Not Sure	ied	_
10.	Do you have any suggestions on ways to improve facilitation?			
	you would like a representative from ODR to contact you to disc our name and contact information	uss this	evaluation, plea	se provide
	Signature (Optional)		Date	

Please return this completed evaluation questionnaire to ODR. We appreciate your response.