



EVALUATION

Contractors State License Board Arbitration Program

Claimant: _____ **vs. Respondent:** _____

Arbitrator: _____

CSLB Case Number: _____

At AMCC we strive to provide professional, efficient and straightforward service to our clients. Your feedback will assist us in meeting our goals. Please be candid, we truly value your opinion. Thank you.

ON A SCALE OF 1 TO 5, PLEASE RATE THE FOLLOWING:
(1 is unsatisfactory, 5 is excellent)

CSLB prompt response to initial inquiry for dispute resolution services: _____

CSLB case management: _____

AMCC Efficient coordination amongst the parties: _____

AMCC Scheduling / notice of hearing: _____

AMCC Case facilitator: overall _____

 professionalism _____

 courtesy _____

 efficiency _____

Arbitrator: overall _____

 professionalism _____

 knowledge _____

 effectiveness _____

Satisfaction with Process _____

Would you seek Alternative Dispute Resolution again? Yes No

Additional Comments: _____

Signed: _____

Printed Name: _____ Date: _____



ARBITRATION MEDIATION CONCILIATION CENTER

WWW.AMCCENTER.COM | (800) 645-4874

3055 Wilshire Blvd., Suite 510
Los Angeles, CA 90010
(213) 487-8660 Fax: (415) 946-3465