

Law Firm/Consultant Rating Form

At the close of a matter please complete and give to your LAE for entry into CLP.

Completed by: _____

Date: _____

MDC ID: _____

Search Name: _____

Outside Firm: _____

City/State: _____

Lead Attorney: _____

In each section (I, II, etc.) enter your rating on the right on a scale of 1-10 ("1" is lowest.) Then add your ratings for the section and divide by the number of completed items.

Average your four section ratings (I, II, III, IV) to obtain the "Overall Evaluation."

Use Firm Again (Y/N) _____

Use Attorney Again (Y/N) _____

Remarks: _____

I. QUALITY _____

Knowledge of Substantive Area _____

Knowledge of Litigation Procedures _____

Document Preparation _____

Memos _____

Pleadings/Briefs _____

Research _____

Interviews _____

Oral Advice _____

Identification of Issues _____

Depositions _____

Written Discovery _____

II. COST EFFECTIVE _____

Plans/Control/Monitors Activities _____

Accuracy of Budgeting/Updates _____

Timeliness of Budgeting/Updates _____

Staffs Appropriately _____

Expenses are Appropriate _____

Billing Practices/Procedures _____

Hourly Rates _____

III. RESPONSIVE _____

Relationship with MDC Counsel _____

Relationship with LSC Counsel _____

Relationship with MDC Employees _____

Keeps MDC Counsel Informed _____

Responds Promptly to Inquiries/Calls _____

IV. RESULTS _____

Summary Judgment _____

Negotiations _____

Settlement _____

ADR/Arbitration _____

Trial _____

V. OVERALL EVALUATION _____

_____ Date Form Information Entered
_____ Copy sent to Libby Cooper