

# COURT INTERPRETER COMPLAINT FORM

## Office of State Courts Administrator

Court interpreters and translators ("interpreters"), certified, registered, or qualified but not certified or registered, must deliver services in a manner faithful to all canons of the code of professional responsibility and court rules and policies (see Supreme Court Operating Rule 19.04). Certified or registered interpreters may be removed from the certification list if a determination is made that a violation was committed. Courts may be notified that a violation was committed by a certified, registered, or qualified but not certified or registered interpreter, and as a result may revoke the appointment of that interpreter.

If you feel a violation has occurred, please complete this complaint form and submit it to the Access to Justice Program, P.O. Box 104480, Jefferson City, MO 65110 or by e-mail to [access2justice@courts.mo.gov](mailto:access2justice@courts.mo.gov). This complaint form will be forwarded to the applicable interpreter coordinator(s) within five (5) business days (excluding holidays and weekends) and the Supreme Court of Missouri's Committee on Language Access.

Interpreter's Name:		Agency Affiliation (if applicable)	
Interpreter's or Agency's Address:			
Interpreter's or Agency's Phone #:			
What is your relationship to the case in question?	(Please circle one of the following.) Plaintiff/Petitioner      Defendant/Respondent      Witness Parent/Relative      Attorney      Other _____		
Is the Interpreter Certified or Registered?	Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>		

### STATEMENT OF FACTS

Date & Time of Incident:	
Location of Incident:	

Describe what happened (attach additional documents, if necessary):

### WITNESS(S) INFORMATION (NAME & CONTACT INFORMATION)

The statements and information provided by me and contained in the attached documents are true to the best of my knowledge and constitute all the information I have on this matter and all of my complaints as of this date against the above-named interpreter. I understand that the information provided in this complaint may be shared with any parties involved during the course of any review.

Submitted By:	Date:
Address:	
Phone:	Email: