

THE SUPREME COURT of OHIO

LANGUAGE SERVICES SECTION DENIAL OF ACCESS TO INTERPRETER COMPLAINT FORM

Complete this form and submit it to The Supreme Court of Ohio Language Services Section 65 South Front Street, Columbus, Ohio 43215-3431. Fax: 614.387.9409. E-mail: <u>lsp.resolution@sc.ohio.gov</u>.

Da	te Submitted:					
Na	me First			Middle	Last	
La	nguage You Speak					
Ad	dress					
					Zip Code	
Ho	ome Phone	Cell Phone		E-Mail		
Court Name				Judge Name		
Ad	dress	(City	State	Zip Code	
Ph	one			Your Case Number		
Da	Date of Court Hearing or Appearance					
	The court did not provide an inter	oreter		□ Other (Explain):		
	-	-		L Outer (Explain).		
	The interpreter did not speak my la					
	The interpreter did not interpret c	orrectly				

You may also submit supporting documentation as a supplement to this form. Retaliaition of any kind against a person who has made a complaint, and/or assitted in any way with the investigation of the complaint is prohibited under Title VI of Civil Rights Act of 1964, 42 USC Sec. 2000d.