



# Language Access Services Complaint Form

Fill out this form to complain about language access services at Yolo Superior Court. Provide as much detail as possible. You do not have to give your name or contact information but it will help us investigate your complaint. You will not receive a response if your name and contact information are not provided.

## Part 1

### Information about Person with Complaint:

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Primary Language you speak: \_\_\_\_\_

### If you are filling out this form for another person, please provide your contact information below:

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address : the \_\_\_\_\_

Email: \_\_\_\_\_

Primary Language you speak: \_\_\_\_\_

## Part 2

Please complete the section that is appropriate to your complaint

**I have a complaint because the court did not provide an interpreter when I requested one:**

YES  NO

Tell us when (date) and where (location) this happened: \_\_\_\_\_

Case Number (if any): \_\_\_\_\_

What is your complaint? \_\_\_\_\_

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(add additional page if needed)

**I have a complaint related to a court provided interpreter:**

YES  NO

Tell us when (date) and where (location) this happened: \_\_\_\_\_

Case Number (if any): \_\_\_\_\_

What is your complaint? \_\_\_\_\_

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(Add additional page if needed)

Part 3

**Have you complained to another agency about this problem? YES  NO**

If yes, please provide name of the agency: \_\_\_\_\_

Give us other feedback or suggestions: \_\_\_\_\_

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**If you provided contact information, we will contact you within 60 days of receiving this form.**

You can fill out this form and turn it in at any service window at the court, or mail it to Yolo Superior Court, 1000 Main Street, Woodland, California or by email to [courtinfo@yolo.courts.ca.gov](mailto:courtinfo@yolo.courts.ca.gov).