



Ottawa Language Access Interpreter Evaluation Form

Please fill out the following evaluation form to help us improve our community interpretation services.
Completed forms can be emailed to ola@swchc.on.ca

Interpreter's Name/ID Number:	
Date & Time of Assignment:	
Language of Interpretation:	Assignment ID:
Service Provider's Name and Contact Information (<i>optional</i>):	

Did the Interpreter....	Yes	No	Comments
Arrive on-time and was prepared for the interpretation session? If late, by how many minutes?			
Introduce themselves to the client and the service provider at the start of the appointment?			
In your opinion, accurately interpret all information from both the client and service provider without changing or omitting any part of the message?			
Engage in a side-conversation with either the client or the service provider, before/during/after the interpretation session?			
Maintain professional behavior and boundaries at all times?			
Refrain from giving advice, expressing opinions, or counsel to clients?			

Overall, how satisfied were you with the interpreter's ability to provide professional interpretation services? (Please circle one)

Not at all satisfied Somewhat satisfied Satisfied Very satisfied
1 2 3 4

Other Comments/Concerns:
