

Nevada Certified Court Interpreter Program

NEVADA CREDENTIALLED (CERTIFIED/REGISTERED)
COURT INTERPRETER COMPLAINT FORM¹

Complainant's name: _____
Mr./Mrs./Ms. First M.I. Last

Address: _____
Street Address Apt. #

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____ **E-mail:** _____

Pursuant to the State Court Administrator Guidelines for the Nevada Certified Court Interpreter Program, Appendix III – Disciplinary Process², I hereby file this complaint in reference to a possible disciplinary breach on the part of _____.
Interpreter Name (please print)

STATEMENT OF FACTS

Please provide the information as delineated below. Attach additional pages if necessary.

1. Date and location of the alleged disciplinary breach.

2. If the incident took place while the interpreter was engaged in a judicial or administrative proceeding, please provide the following:

a) In what court or agency was the case heard?

¹ The complaint procedure applies only to interpreters who are listed on active status on the NV Court Interpreter Roster maintained by the Certified Court Interpreter Program, and have allegedly engaged in unethical or unprofessional conduct while performing their interpreter duties.

² State Court Administrator Guidelines for the Nevada Certified Court Interpreter Program available at <http://www.nevadajudiciary.us/index.php/viewdocumentsandforms/func-startdown/9410/>.

b) What was the case number?

c) What is/was your relationship to the case in question:

Plaintiff/Petitioner

Defendant/Respondent

Victim

Witness

Parent/Relative

Attorney for

Other

d) Please identify witnesses to the interpreter's action:

Name

Relationship

Contact information (i.e. mailing address, phone, e-mail)

3. Identify any other person who may have additional information:

Name

I understand that the information provided in this complaint may be shared in whole or in part during the course of any investigation with any of the parties involved and the Review Panel to hear the complaint.

Under penalty of perjury, I swear of affirm that the statements and information provided by me and contained in any 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.

Signature: _____

Date: _____

Please **submit the completed form along with any additional documents** to the attention of:

Nevada Credentialed Court Interpreter Program
Administrative Office of the Courts
201 S. Carson Street, Suite 250
Carson City, NV 89701

Phone: 775-687-9806

Fax: 775-687-9850

E-mail: courtinterpreters@nvcourts.nv.gov