

Oldham Language Shop Interpreter Evaluation Form

Dear User

Thank you for using Oldham Language Shop today. In order to provide a good service and train our interpreters properly we need your feedback about this session.

We would be grateful if you would fill in this form about the interpreter and return it in confidence by post or by fax directly to Oldham Language Shop at the address and fax number given below. Your co-operation is much appreciated.

Please write clearly and concisely.

Your name: _____	Position: _____
Organisation: _____	Department: _____
Interpreter's Name: _____	Language: _____
Date of Assignment: _____	Time: _____
Purpose of the interview: _____	

Did the interpreter arrive on time? **Yes** **No**
 If not how late was the interpreter? _____

Was the interpreter briefed before the start of the session? **Yes** **No**
 If no, say why? _____

How would you summarise the interpreter's strengths and weaknesses?

Please indicate your level of understanding of how you think that interpreter has performed in:

	Poor	Average	Good	Excellent
Spoken English				
Understanding of subject matter				
Understanding of the job (Interpretation)				
Understanding of cultural issues				
Being courteous and understanding				
Being a professional				

What suggestions would you make for improving our Services?

Would you be willing to work with same interpreter again? **Yes** **No**
If not could you indicate why? (use separate sheet if necessary)

Please return completed form to: Oldham Language Shop, Room 315, Chief Executives Department, Civic Centre, P.O.Box 335, West Street, Oldham, OL1 1XL Tel : 0161 911 4519, Fax: 0161 911 3800 Email: languageshop@oldham.gov.uk

IF YOU NEED MORE COPIES OF THIS FORM PLEASE CONTACT US AT OITS OR MAKE COPIES OF THIS FORM. THANK YOU!