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# Client Feedback

Assignment Date \_\_\_\_\_ Cause / File # \_\_\_\_\_

Language \_\_\_\_\_ Case Name \_\_\_\_\_

Interpreter \_\_\_\_\_

Was our office staff courteous? Yes No

Were we efficient in fulfilling your request? Yes No

Was the interpreter on time? Yes No

Was the interpreter properly groomed and attired? Yes No

Did the interpreter act in a professional manner? Yes No

Comments

Name \_\_\_\_\_ Date \_\_\_\_\_

Company \_\_\_\_\_ E-mail Address \_\_\_\_\_

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