

# Language Access Services Feedback Form

This form can provide details about being unable to access services from the City of Bend because of language-related difficulties. Use this form to provide feedback for the City of Bend about any location (both physical or virtual spaces) where you had trouble communicating because you needed an interpreter or materials translated into another language.

This form is translated into Spanish and may be translated into additional languages by request.

## Your Contact Information

Please include as much or as little information on this form based on your comfort level or to remain anonymous. If you want to be contacted about your feedback, you must include an email address or a phone number.

### Name

First name	Last name
------------	-----------

### Mailing Address

Address		
---------	--	--

City	State	ZIP
------	-------	-----

### Phone Email

Home/Cell Number	Email
------------------	-------

## Interpretation/Translation Details

The following questions help us to understand your experience. They also help us improve our processes moving forward. Please share as many details as you can.

Date of Incident: \_\_\_\_\_

Incident:

In person       Letter       Email       Over the phone       City of Bend website

In what language did you need assistance? \_\_\_\_\_

Describe the issue you experienced:

- Lack of bilingual personnel
- Lack of interpretation/translation services
- Delay in receiving interpretation/translation services
- Quality of interpretation/translation services
- Lack of forms/materials in non-English languages
- Lack of signs informing the public of interpretation/translation services
- Other: \_\_\_\_\_

Please share a brief description of the incident. You may attach additional pages if needed.

---

---

---

Did you know you have the right to free interpretation/translation services before this incident?

Yes

No

## Submit this Form

If you need assistance filling out this form, please contact [equity@bendoregon.gov](mailto:equity@bendoregon.gov). Our team will assist you in submitting your feedback.

**Return this form by e-mail or mail to:**

Lindsay Wengloski  
Language Access Coordinator  
City of Bend

(541) 388-5505 (main line)  
(541) 323-7177 (office)

[equity@bendoregon.gov](mailto:equity@bendoregon.gov)  
<https://www.bendoregon.gov/>

**Mailing address:**

City of Bend  
ATTN: Equity and Inclusion Department  
PO Box 1458  
Bend, OR 97709

**Please keep a copy of this form for your records. Call 541-323-7177 if you have questions or concerns.**

**Language Assistance Services & Accommodation Information for People with Disabilities**

You can obtain this information in alternate formats such as Braille, electronic format, etc. Free language assistance services are also available. Please email the Equity & Inclusion Department at [equity@bendoregon.gov](mailto:equity@bendoregon.gov) or call 541-323-8563. Relay Users Dial 7-1-1.

**Servicios de asistencia lingüística e información sobre alojamiento para personas con discapacidad**

Puede obtener esta información en formatos alternativos como Braille, formato electrónico, etc. También disponemos de servicios gratuitos de asistencia lingüística. Póngase en contacto con Gestor del proyecto o creador del documento en [equity@bendoregon.gov](mailto:equity@bendoregon.gov) o número de teléfono 541-323-8563. Los usuarios del servicio de retransmisión deben marcar el 7-1-1.