



LANGUAGE AND COMMUNICATIONS ACCESS COMPLAINT FORM

The Office of Language and Communications Access (OLCA) oversees interpretation (Spoken & Sign Language), translation and assistive technology to ensure every City of Boston department provides accessible services to all constituents. If you feel that you were not provided adequate access, please fill out this form to submit a complaint.

You may do so anonymously. Please note that without contact information, we will not be able to follow up with you regarding your complaint. For questions or support, please contact us: lca@boston.gov or call: 617-635-3414.

If you would like to file a complaint with the American with Disabilities Act (ADA), directions for filing an ADA Grievance can be found [here](#).

- By Phone: 617-635-3682
- By Teletype: 617-635-2541
- Or in person: 1 City Hall Square, Room 967, Boston, MA 02201

Personal Information

We recommend you include your contact information, if you would like us to follow up with you. If you prefer to remain anonymous however, that is acceptable as well. We will investigate the complaint either way.

Today's Date:

Incident Date:

Name (Optional):

Email (Optional):

Phone Number (Optional):

Which City of Boston department or program are you filing a complaint about? (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Age Strong Commission | <input type="checkbox"/> Language and Communications Access |
| <input type="checkbox"/> Analytics Team | <input type="checkbox"/> Law |
| <input type="checkbox"/> Animal Care and Control | <input type="checkbox"/> LGBTQ+ Advancement |
| <input type="checkbox"/> Archaeology | <input type="checkbox"/> Licensing Board |
| <input type="checkbox"/> Archives and Records Management | <input type="checkbox"/> Mayor's Office |



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- ☐ Arts and Culture
- ☐ Assessing
- ☐ Auditing
- ☐ Black Male Advancement
- ☐ BOS:311
- ☐ Boston Bikes
- ☐ Boston Centers for Youth & Families
- ☐ Boston Planning and Development Agency
- ☐ Boston Public Library
- ☐ Broadband and Cable

- ☐ Budget
- ☐ Central Fleet Management
- ☐ City Clerk
- ☐ City Council
- ☐ Civic Organizing
- ☐ Commission for People with Disabilities
- ☐ Community Engagement
- ☐ Consumer Affairs
- ☐ Digital Team
- ☐ Early Childhood
- ☐ Economic Development

- ☐ Economic Opportunity and Inclusion
- ☐ Elections
- ☐ Emergency Management
- ☐ Emergency Medical Services

- ☐ Entertainment Licensing
- ☐ Environment
- ☐ Fair Housing and Equity

- ☐ Finance Commission
- ☐ Fire
- ☐ Fire Operations
- ☐ Fire Prevention
- ☐ Fire Safety
- ☐ Food Justice

- ☐ Neighborhood Development
- ☐ Neighborhood Services
- ☐ New Urban Mechanics
- ☐ Parking Clerk
- ☐ Parks and Recreation
- ☐ Participatory Budgeting
- ☐ Police
- ☐ Police Accountability and Transparency
- ☐ Press Office
- ☐ Procurement

- ☐ Property Management
- ☐ Public Facilities
- ☐ Public Health Commission

- ☐ Public Records
- ☐ Public Safety
- ☐ Public Schools
- ☐ Public Service and Community Outreach

- ☐ Public Works
- ☐ Recovery Service
- ☐ Registry: Birth, Death, and Marriage

- ☐ Resilience and Racial Equity
- ☐ Human Services
- ☐ Retirement
- ☐ Returning Citizens
- ☐ Small Business Development
- ☐ SPARK

- ☐ Streets

- ☐ Supplier and Workforce Diversity





- | | |
|--|---|
| <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Tax Collection |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Tourism, Sports, and Entertainment |
| <input type="checkbox"/> Housing Authority | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Treasury |
| | <input type="checkbox"/> Veterans Services |
| | <input type="checkbox"/> Water and Sewer Commission |
| | <input type="checkbox"/> Worker Empowerment |
| | <input type="checkbox"/> Workforce Development |
| <input type="checkbox"/> Human Rights Commission | <input type="checkbox"/> Women's Advancement |
| <input type="checkbox"/> Immigrant Advancement | |
| <input type="checkbox"/> Innovation and Technology | <input type="checkbox"/> Youth Engagement and Employment |
| <input type="checkbox"/> Inspectional Services | <input type="checkbox"/> Other |
| <input type="checkbox"/> Intergovernmental Relations | |
| <input type="checkbox"/> Labor Relations | |
| <input type="checkbox"/> Landmarks Commission | |

Which neighborhood of Boston do you live in? (optional) (check one option):

- | | |
|---|---|
| <input type="checkbox"/> Allston | <input type="checkbox"/> Mission Hill-Longwood |
| <input type="checkbox"/> Back Bay | <input type="checkbox"/> North End |
| <input type="checkbox"/> Beacon Hill | <input type="checkbox"/> Roslindale |
| <input type="checkbox"/> Brighton | <input type="checkbox"/> Roxbury |
| <input type="checkbox"/> Charlestown | <input type="checkbox"/> South Boston |
| <input type="checkbox"/> Dorchester | <input type="checkbox"/> South Boston Waterfront/Fort Point |
| <input type="checkbox"/> Downtown | <input type="checkbox"/> South End |
| <input type="checkbox"/> East Boston | <input type="checkbox"/> West End |
| <input type="checkbox"/> Fenway-Kenmore | <input type="checkbox"/> West Roxbury |
| <input type="checkbox"/> Hyde Park | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Jamaica Plain | <input type="checkbox"/> I don't live in Boston |
| <input type="checkbox"/> Mattapan | <input type="checkbox"/> Other |

Which of the following best describes the issue you encountered? (check all that apply):

- ☐ I requested an interpreter and was not provided with one.
- ☐ I requested a document translation and it was not provided.
- ☐ I requested assistive technology and it was not provided.
- ☐ I was not informed about the availability of language services
- ☐ Lack of translated materials (such as forms, notices of eligibility for services, or benefits).
- ☐ Lack of translated, publicly-posted information about department services, programs or events.





- ☐ Poor quality of translated materials.
- ☐ Lack of bilingual/multilingual employees or interpreters to provide help in my language.
- ☐ Employee or interpreter had inadequate proficiency in my preferred language.
- ☐ Other

Please provide a description. Include details such as the name(s) or position(s) of any relevant individuals and the type of services/information that you were seeking.

What language(s) or accommodation did you need? (check all that apply):

- ☐ American Sign Language (ASL)
- ☐ Braille
- ☐ CART
- ☐ Arabic
- ☐ Cabo Verdean Creole
- ☐ French
- ☐ Haitian Creole
- ☐ Portuguese (Brazilian)
- ☐ Russian
- ☐ Cantonese
- ☐ Mandarin
- ☐ Simplified Chinese
- ☐ Traditional Chinese
- ☐ Somali
- ☐ Spanish (Latin American)
- ☐ Vietnamese
- ☐ Other

If you checked 'Other', please let us know which language:

How would you like to see this complaint resolved?





