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| **Type of Request:  Interpretation (spoken)  Translation (written)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Today’s date:** Enter Date | | | | | | | | | |
| Please fill out both **Requestor Information** & **Needed Service** corresponding section in its entirety and***email form(s) to both Translation Service Coordinators***. Requests received after **3pm will be processed the following school day**. **Interpretation Cancellation:** A fee will apply from vendor for last minute interpretation cancellations. To avoid fees, please give at least a 36-hour notice.  **(PTA, PTSA, TEA, Pearson, McGraw, Organization Partnerships etc. are NOT FWISD entities)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Requestor Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | **E-mail:** | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Phone:** | | |  | | | | | | | | | | | | **Department/School Name:** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Address:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name of Principal/AP or Director/Head of Department Authorizing request:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Who is your audience?** | | | | | | | | | | | Select Audience | | | | | | | | | | **Other:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Interpretation (face to face)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Target Language:** | | | | | | | Select Language | | | | | | | | | | | | | **Other:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Type of Service:** | | | | | | Select Service Type | | | | | | | | | | | | | | | | | | | | | | | | | | **Event Type:** | | | | | | | | Select Event Type | | | | | | | | | | | | |
| **# of Interpreters Needed/ Language:** | | | | | | | | | | | | | | | |  | **# of Equipment Case/s Needed:** | | | | | | | | | | | | | | | | | | | | | # | | | | **Platform:** | | | | Select Platform Type | | | | | | |
| **Contact Person:** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | **Contact Phone # During Event:** | | | | | | | | | | | | | | | | |  | | | | | |
| **Date of Appointment:** | | | | | | | | | | Select Date | | | | | | | | **Start Time:** | | | | | | | | | Select Start Time | | | | | | | | | | | | **Estimated Length:** | | | | | | | | | | | Select Duration | | |
| **Topic:** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Address of Appointment:** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Consecutive or Simultaneous?** | | | | | | | | | | | | | | Select Service | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Translation (written) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Translation Type:** | | | | | | | | Select Translation Type | | | | | | | | | | | | | | | | | | **\*Expected Due Date:** | | | | | | | | | | | | | | | Select Date | | | | | | | **\*SUBJECT TO CHANGE DUE TO LENGTH, COMPLEXITY & VOLUME INTAKE.** | | | | |
| **Type of Document:** | | | | | | | | | Select Document Type | | | | | | | | | | | | | | | | | | | | **Other:** | | | |  | | | | | | | | | | | | | | | | | | | |
| **Original Language/s:** | | | | | | | | | | | | Select Language | | | | | | | **Other:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Target Language/s:** | | | | | | | | | Select Language | | | | | | | | | | **Other:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Titles of All Documents:** **(please make sure all documents are editable)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | **Doc. Ext.** | | | | | | | |  | **# of Words:** | | | | | |  | **# of Pages:** |
| **1.** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | |  |  | | | | | |  |  |
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| **Acknowledgement Statement Signature** | | | | | | | | | | | | | | | | | | | | | | **Employee Title** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Date** | | | |
| **Additional Notes/Special Instructions** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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