

CAMPUS INTERPRETER REQUEST

Today's Date: _____

Time: _____

Your Name & E-mail: _____

***ALL REQUESTS SHOULD BE MADE 48 HOURS OR MORE IN ADVANCE, SO ARRANGEMENTS CAN BE MADE TO TRY TO FIND INTERPRETERS. COMPLETING THE FORM DOES NOT GUARANTEE AN INTERPRTER WILL BE PROVIDED.**

Be specific when completing the form!*

Interpreter needed on: _____ / _____
Date Day

Time: _____ to _____ Place: _____
Bldg. Rm #

Zoom: _____
Link Passcode

Describe the Request: (Check One & explain)

- | | | |
|-----------------------------|------------------------|-------------------|
| ___ Field Trip | ___ Counselor Appt. | ___ Tutoring |
| ___ Student/Teacher meeting | ___ Club Meeting/Event | ___ Financial Aid |

EXPLAIN ASSIGNMENT/CLASS: _____

FOR OFFICE USE ONLY

INTERPRETER ASSIGNED: _____

RANCHO SANTIAGO COMMUNITY COLLEGE DISTRICT
SANTA ANA COLLEGE/SANTIAGO CANYON COLLEGE

DSPS/DEAF AND HARD OF HEARING SERVICES