

## FORT BEND COUNTY JUSTICE CENTER

## **Interpreting/Translation Services Request Form**

If requested, the Court will provide an interpreter at no cost to the LEP litigant or witness. It is the responsibility of the attorney or LEP individual to complete the request form and return it to the Court, either in person or by email.

□ District Court No			
<ul><li>County Court at Law No</li><li>Magistrate Court</li><li>Other</li></ul>			
		Cause #	
Language Requested:			
ASL/Other Interpretation Accommodation Date of Service:	•	duration of the assignment:hours/days	
Time of Service:	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	auration of the designmentnours,aujo	
The person requesting services is a:  Defendant Party to a civil case Parent of a minor		Witness Other. Please explain:	
Type of assignment:		(plea, trial, motion, etc)	
<ul><li>In Person Interpretation (will requi</li><li>Remote Interpretation. [ ] telepho</li><li>Written Translation</li></ul>			
Services requested by:			
□ Judge		Parties	
<ul><li>☐ FBCJ Staff</li><li>☐ Attorney</li></ul>		□ Pro se	
Special Instructions:			
Completed forms should be delivered to language access services, please contactanguageaccess@fbctx.gov.			
	FOR OFFICE USE ONLY	:	
Authorized by:	on:	, 20	
Name of the interpreter:		License #	
Date of service:, 20	Start time:	End time:	