

In the Court of Common Pleas of _____ County

Commonwealth of Pennsylvania

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:
:
:
:
:
:

Case number: _____

vs.

Defendant

Interpreter Request Notice – Criminal

Interpreter services are hereby requested in the above captioned matter as follows:

Hearing Date: _____ Time: _____ Courtroom: _____

Hearing type: _____

Name of person requiring the interpreter: _____

Relationship to case: Defendant Victim Witness Juvenile

Parent/Person *in loco parentis* other: _____

Language (*choose foreign or deaf and provide requested information*):

Foreign language spoken: _____ Dialect (if applicable): _____

Deaf/hard of hearing: American Sign Language other non-ASL type: _____

Country of origin: _____ Region/Province (if known): _____

Please give a brief description of any educational, physical, mental or other particular condition which may affect or limit the communication of the person for whom the interpreter is requested: _____

Print Requestor's Name

Phone

Date

Requestor's Signature

Title