INTERPRETER REQUEST NOTICE

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

Case Name & Docket Number:			Name of the person requiring the interpreter (if different from the case name):			
Date of Court Proceeding & Time:			Estimated length of proceeding:			
Relationship to Case: ☐ Plaintiff/Petitioner ☐ Defendant/Respondent ☐ Victim ☐ Witness ☐ Juvenile ☐ Child ☐ Parent/Person in loco parentis						
Name of Judge, Hearing Officer, or Conference Officer:						
Location: Courthouse - CR #		☐ Children& Youth	☐ Juvenile Justice C	☐ Juvenile Justice Center ☐ Schaffner Youth Center		
☐ MDJ Urrutia	☐ MDJ Pianka	☐ MDJ 12-1-04	☐ MDJ H. Johnson	☐ MDJ Lindsay	☐ MDJ Smith	
☐ MDJ K. Lenker	☐ MDJ Judy	☐ MDJ McKnight	☐ MDJ P. Zozos	☐ MDJ Margerum	☐ MDJ Klein	
☐ MDJ G. Johnson	☐ MDJ Wenner	☐ MDJ Pelino	☐ Night Court	☐ Central Court/ Pri	son	
☐ Virtual information (Audio/ Video):						
Type of case: ☐ Criminal ☐ Civil ☐ Family ☐ Juvenile ☐ PFA ☐ Mental Health ☐ Other:						
• If the interpreter is not available in person: Book the interpreter remotely Contact the requester						
Language (choose foreign or deaf and provide requested information):						
☐ Foreign language spoken:		Country of origin/ Region/ Province (if known): Dialect (if applicable):				
☐ Deaf/hard of hearing:		☐ American Sign La	☐ American Sign Language ☐ Other non-ASL type:			
Please give a brief description of any particular condition which may affect or limit the communication skills of the person for whom the interpreter is requested:						
Attorney Name:		Attorney email:				
List criminal charges:						
If the proceeding is a guilty plea, has the colloquy form been discussed? ☐ Yes ☐ No						
Requestor's Name:						
Phone:		Email:				
Relationship to Person Requiring Interpreter:						

Email the completed form to interpreterrequest@dauphincounty.gov, or mail to Language Access Coordinator, 3rd Floor Court Administration, Dauphin County Courthouse, 101 Market Street, Harrisburg, PA 17101