

INTERPRETER PAYMENT FORM

Title III Funds, to the extent they are available, will support interpreting and translating for spoken or written languages other than English.

THIS FORM MUST BE FILLED OUT BY PERSON REQUESTING SERVICE

PROCEDURE:

After the service of an interpreter or translator has been performed, submit this completed form to the Office for Social Studies, LOTE & ENL (at LHS-Room 2208) with principal's signature and time sheet.

Person requesting service and completing this form: _____

Phone number where you can be reached: (____) _____

BUILDING: _____ **LANGUAGE:** _____

DATE	STUDENT NAME(S):	GRADE	PARENT NAME(S):

**Timesheets must be submitted for oral interpreting by a person on the interpreters list.
Translation of documents may only be performed by approved consultants.**

NAME OF INTERPRETER: _____

Time In/Out is needed for service provided in person by interpreters from our list.

DATE	TIME IN	TIME OUT	TOTAL TIME	NOTES-LANGUGE (PARENT CONF., ANNUAL REVIEW, ETC....)

Total time: _____

Principal/Director verifying service rendered _____

SIGNATURE OF BUILDING PRINCIPAL/DIRECTOR