

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 requested in the above captioned matter as follows:

Hearing Date: _____ Time: _____ Courtroom/Office: _____

Address/Location: _____

Proceeding type (*Select all that apply*):

☐ Jury trial ☐ Bench trial ☐ Preliminary Hearing ☐ Plea ☐ Sentencing ☐ Motion ☐ Status

☐ Arraignment ☐ ARD ☐ VOP ☐ PCRA ☐ Private Criminal Complaint ☐ Summary

☐ Drug/Veteran's/Mental Health Court ☐ Community Court ☐ other: _____

Name of person (LEP) needing the interpreter: _____

LEP relationship to case: ☐ Defendant ☐ Complainant ☐ Victim ☐ Witness ☐ Juvenile

☐ Parent/Person *in loco parentis* ☐ other: _____

Language (*Select foreign or sign language and provide all requested information*):

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

Sign language: ☐ American Sign Language ☐ other non-ASL: _____

☐ Foreign sign language (country): _____

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

Does the LEP speak a second language? ☐ Yes ☐ No Other language: _____

Please provide additional information about the communication preferences of the limited English speaker.

Print Requestor's Name

Date

Phone

Requestor's Signature

Title

E-mail