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| REQUEST FOR COURT INTERPRETER  By an INDIVIDUAL WHO HAs BEEN GIVEN FEE WAIVER | | | | | | | | | | | | | | | | | |
| *(PLEASE PRINT CLEARLY)* | | | | | | | | | | | | | | | | | |
| This form should be used by individuals who have been given a Fee Waiver Certificate to request the services of a court-provided interpreter for themselves or for one or more of their witnesses, in a language other than English, French or a visual language. | | | | | | | | | | | | | | | | | |
| **Contact the court office immediately if your  contact information changes.** | | | | | | | | Court File/Claim Number: | | | | | |  | | | |
|  | | | | | |  | | | |
| Full Legal Name: | |  | | | |  | | ***To be completed by court office staff:*** | | | | | | | | | |
| Current Mailing Address: | | | | | |  | |  | Court Office Address: | | | | | | | |  |
|  | | | | | |  | |  |  | | | | | | | |  |
|  | |  |  | | | | | | | |  |
| Telephone No.: |  | | | | |  | |  | Court Office Telephone No.: | | | | | |  | |  |
|  | (any daytime numbers where you may be contacted) | | | | |  | |  | | | | | | | | |  |
| E-mail Address: |  | | | | |  | | | | | | | | | | | |
| Court interpreters in civil, family and Small Claims Court cases will be provided to individuals who have been given a Fee Waiver Certificate and who indicate the need for an interpreter for either themselves or their witness(es), for all court appearances at which a judicial official presides. The presence and use of the court interpreter in the courtroom remains at the discretion of the presiding judicial official. | | | | | | | | | | | | | | | | | |
| **SECTION A** | | | | | | | | | | | | | | | | | |
| **If you have been given a Fee Waiver Certificate and you require a court interpreter for yourself:** | | | | | | | | | | | | | | | | | |
| 1. Indicate the language for which you require interpretation: | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | (language required) | | | | | | |
| 1. Sign and date this form at the bottom. | | | | | | | | | | | | | | | | | |
| 1. Provide the signed form to court staff immediately. | | | | | | | | | | | | | | | | | |
| This form will be used to schedule an interpreter for you for every event in your case. | | | | | | | | | | | | | | | | | |
| **SECTION B** | | | | | | | | | | | | | | | | | |
| **If you have been given a Fee Waiver Certificate and one or more of your witnesses requires a court interpreter**, you must complete a new copy of this form for each court appearance where the witness will be appearing and will require an interpreter: | | | | | | | | | | | | | | | | | |
| 1. Fill out the information below indicating the language required and date and time of the court appearance. | | | | | | | | | | | | | | | | | |
| 1. Sign and date this form at the bottom. | | | | | | | | | | | | | | | | | |
| 1. Provide the signed form to court staff as soon as the information is available and **at least seven (7) working days** before the date of the court appearance. Working days are defined as days when the court office is open. | | | | | | | | | | | | | | | | | |
|  | | | |  |  | | | | | | |  |  | | | | |
| (name of witness) | | | |  | (language required) | | | | | | |  | (date and time required) | | | | |
|  | | | |  |  | | | | | | |  |  | | | | |
| (name of witness) | | | |  | (language required) | | | | | | |  | (date and time required) | | | | |
|  | | | |  |  | | | | | | |  |  | | | | |
| (name of witness) | | | |  | (language required) | | | | | | |  | (date and time required) | | | | |
| Check here if you have additional witness(es). List them on a separate sheet, indicating the language and date and time required and attach it to this form. | | | | | | | | | | | | | | | | | |
| **NOTE:** After you have submitted this request for an interpreter, if you become aware that an interpreter is not required for a court appearance, **notify the court office immediately to cancel the interpreter**. | | | | | | | | | | | | | | | | | |
|  | | |  | | | |  | | |  | | | | | |  | |
|  | | | Date of signature | | | |  | | | Signature of Requestor | | | | | |  | |

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| --- | --- | --- | --- |
| **FOR COURT OFFICE STAFF USE ONLY** | | | |
| Forwarded to |  | on |  |
|  | (name of person or office) |  | (date forwarded) |