

Parent Request Form for Primary Language Assistance

To request Free translation/interpretation services, please fill out this form.

Parent/Guardian Contact Information

Date:_			
Name:		 	Home Phone:
Cell Ph	none:	Email:	
Addres	ss (optional):		
Name	of School:		
Name	of Child/Children:		
Primar	y Home Language:		
Please	e mark an "X" in the appropriate box(es)		
* I nee	d translation services for: School Newsletter School / Classroom policies School calendar Letters from Principal / Teacher School Notice Other documents(s) title(s):		
* I nee	d interpretation services for: Parent / Teacher conference	Date:	Time:
	Principal meeting		 Time:
	Back to school night	Date: _	Time:
	PTA meetings	Date: _	Time:
	School Site Council meetings	Date: _	Time:
	English Learner Advisory Council Meeting	Date: _	Time:
	Other meeting or event:		
	Date:Time:		

- ✓ When you have completed the form, please give it to a staff member at your school's main office.
- ✓ You may request a copy of this form for your records.

YOUR TRANSLATION AND INTERPRETATION NEEDS ARE VERY IMPORTANT TO US!

Some documents may be interpreted rather than translate. Please allow 2 weeks to process your request.

For more information or assistance, you may call Translation Services at 510-273-1665.

SERVICES ARE PROVIDED TO PARENTS AT NO COST.