



# INTERPRETER/STUDENT REQUEST FORM

Student Name \_\_\_\_\_ Student Email \_\_\_\_\_

Student ID \_\_\_\_\_ Semester \_\_\_\_\_

**Instructions:**

1. Fill out this form listing **ALL** your classes. (Labs should be listed separately.)
2. Check off the **INTERPRETER** box if you are requesting an interpreter for the class.
3. Give this form to the Special Programs Coordinator.
4. If this form is not turned in at least three weeks PRIOR to the start of classes, you may not have interpreters in your classes.
5. Interpreters will be schedules for these classes only. **Any** changes (add, drop, etc.) please notify the Special Programs Office.

| CRN # | Class Name | Instructor | Time | Day (s) | Bldg/Room | Interpreter |
|-------|------------|------------|------|---------|-----------|-------------|
|       |            |            |      |         |           |             |
|       |            |            |      |         |           |             |
|       |            |            |      |         |           |             |
|       |            |            |      |         |           |             |
|       |            |            |      |         |           |             |