

REQUEST FOR NON-SPANISH INTERPRETER

SPOKEN FOREIGN LANGUAGE INTERPRETER REQUEST—*Staff Interpreter Districts Only*

Please submit this request form to your local AOC staff court interpreter via **email attachment, personal delivery or fax:**

Buncombe: [Marie Ontiveros](#)
Fax: 828.259.3381
Durham: [Maria Stafford](#)
Fax: 919.808.3039
Forsyth: [Selma Ahnert](#)
Fax: 336.779.6336

Chatham/Orange: [Maria Stawsky](#)
Fax: 919.644.4647
Guilford: [Karin Vicard](#)
Fax: 336.412.7805
Johnston/Lee/Harnett: [Arianna Aguilar](#)
Fax: 919.209.5501

Wake: [Jorge Padro](#) and [Ron Vasquez](#)
Fax: 919.792.5002
Mecklenburg: [Michael Cortez](#) and [David Miller](#)
Personal delivery or email

Language:

Date of request:

County:

Date Services are Needed:

Time the hearing will start:

Duration (*check one*):

Specific Case (2 hours or less)

AM/PM Session (Multiple Cases)

Full Day (Trial Only)

Physical address *AND* courtroom number (if applicable) where interpreter is to appear:

Name of Person with Limited English Proficiency (LEP):

LEP party is (check one):

Indigent Defendant/Respondent[†]

Petitioner/Victim/Witness

Parent of Juvenile

Other _____

[†]In order to appoint an interpreter for an indigent defendant/respondent, indigency must be documented with the following:

- [AOC-G-107](#), Motion and Appointment Authorizing Foreign Language Interpreter/Translator, **AND** [AOC-CR-224](#), Order of Assignment or Denial of Counsel, **OR****
- [AOC-G-107](#), Motion and Appointment Authorizing Foreign Language Interpreter/Translator, **AND** [AOC-CR-226](#), Affidavit of Indigency *****If the defendant waives counsel, the Court must still determine indigency for the purposes of appointing an interpreter, and an approved [AOC-CR-226](#) must be attached.****

NOTE: This documentation must be attached in order to appoint an interpreter for an indigent defendant. An interpreter will not be assigned without the required documentation.

Requestor (Name and Title):

Phone number(s):

Email:

Prosecuting Attorney:

Phone number(s):

Email:

Defense Attorney:

Phone number(s):

Email:

File number(s):

In the matter of:

vs.

Type of Case (check one):

Criminal/Traffic

Criminal Non-Support

50B Domestic Violence proceedings

Child Custody Mediation

Child Planning Conference

Involuntary Commitment

Juvenile (*Specify*)

TPR

A/N/D

Delinquency

Additional Information:

The interpreter is requested to provide services:

In-Court

Out-of-Court*

Court proceedings

Public Defender

Custody Mediation

Assigned Counsel

District Attorney

***For counsel-client or DA-victim/witness communication before an initial court date, Public Defender, Assigned Counsel, or District Attorney must submit this request. Once an interpreter has been assigned, Public Defender, Assigned Counsel, or District Attorney may contact the interpreter directly to arrange for services for counsel-client/DA-victim/witness communication on a date *other than the court date*.**

FOR OFFICE USE ONLY:

___/___/___ Added to spreadsheet

___/___/___ Interpreter contacted

___/___/___ Interpreter confirmed

___/___/___ Assignment sent to interpreter

___/___/___ Confirmation sent to requestor

___/___/___ BIAMP Help Desk Ticket#

Future Court Dates:

___/___/___ ___/___/___ ___/___/___

___/___/___ ___/___/___ ___/___/___

___/___/___ ___/___/___ ___/___/___

___/___/___ ___/___/___ ___/___/___

CASE RESOLVED: ___/___/___ *Revised 6/11 sta*

For further clarification about when the state bears the costs of an interpreter, please see [Section 7.2](#) of *Policies and Best Practices for the Use of Foreign Language Interpreting and Translating Services in the North Carolina Court System* (available on www.nccourts.org).

For further assistance, please contact the Interpreting Services Program at (919) 890-1212 or Sarah.T.Arredondo@nccourts.org.