

# REQUEST FOR SPOKEN FOREIGN LANGUAGE COURT INTERPRETER

The Judicial Department provides spoken foreign language court interpreters at state expense for all Limited English Proficient (LEP) parties in interest in most court proceedings, child custody mediation, child planning conferences, and out-of-court communications on behalf of public defenders, assigned/appointed counsel, district attorneys and the GAL Program. **Note: Public Defenders, Assigned Counsel, District Attorney or GAL: For out-of-court communication with the LEP individual on a date other than the court date, submit this form only for LOTS services. For out-of-court Spanish language needs, contact a Spanish court interpreter directly from the Registry.**

A request for an interpreter must be submitted to the language access coordinator (LAC) in the county in which the case will be heard. When you select the county in the box below, this form automatically will be sent to the LAC for that county.

Please fill out this form completely, and click the **"Submit"** button at the bottom of the page to send your request via email. Once the email is created, you must click **"Send"** to submit your request. You will receive a confirmation email to acknowledge your successful submission of the form. If you do not receive a confirmation email within 24 hours, please contact the LAC for the county. You may contact the LAC at <CountyName>.Interpreter@nccourts.org. For example, to contact the Wake County LAC, send an email to Wake.Interpreter@nccourts.org. For New Hanover county, send an email to NewHanover.Interpreter@nccourts.org. **You should submit a new request form for each court date for which an interpreter is needed. Please fill out this form using Adobe Reader or Internet Explorer.**

Requestor Last Name		Requestor First Name		Middle Initial
Requestor Title	Phone No.	Email		
Language (select from list)		County (select from list)		
Date of Service (MM/DD/YYYY)		Courtroom No.	Select an hour, quarter hour and time of day :	
Estimated Duration (select from list)	Comments Regarding Duration			
Physical Address of Courthouse or Location Where Interpreter is to Appear				
Last Name / Surname of LEP Person		First Name of LEP Person		Middle Initial
Last Name / Surname of LEP Person		First Name of LEP Person		Middle Initial
LEP Party is (select all that apply)				
Defendant / Respondent		Witness	Respondent Parent(s)	Parent / Guardian of Juvenile
Petitioner / Plaintiff		Victim	Juvenile or Minor Child	
Last Name of Prosecuting Attorney or Attorney for Petitioner/Plaintiff		First Name of Prosecuting Attorney or Attorney for Petitioner/Plaintiff		Middle Initial
Phone No.		Email		
Last Name of Attorney for Defendant/Respondent		First Name of Attorney for Defendant/Respondent		Middle Initial
Phone No.		Email		
Enter at least one File No.(s)		Type of Case (select from list)		
Case Name		Type of Proceeding (select from list)	Jurisdiction (select from list)	
VS.				
Interpreter is Requested to Provide Services (select all In-Court / Out-of-Court services that apply)				
<b>In-Court</b>		Court Proceeding	Custody Mediation Session or Orientation	Child Planning Conference
<b>Out-Of-Court</b>		District Attorney	Public Defender	Assigned Counsel
				GAL Program
Additional Information				
<b>FOR OFFICE USE ONLY:</b>	Added to Spreadsheet Date	Interpreter Contacted Date	Interpreter Confirmed Date	
Date of Request	Assignment Sent to Interpreter Date	Confirmation Sent to Requestor Date	Case(s) Resolved Date	