

1202 W Farm Rd 155 University Health Services Stillwater, OK 74078 O | 405-744-7116 Voice/TDD F | 405-744-1143 accessibility.okstate.edu

Interpreter Request

Request for reoccurring events (i.e. classes, clinical/internship hours and school related trips) must be made 2 weeks in advance, all others must be made 3 business days in advance. Cancelations must be made 24 hours ahead of time. Emergencies due to illness or another unforeseen event must be communicated to the Interpreter Coordinator as soon as possible.

1.	Today's Date	
2.	Name of person requiring an interpreter	
3.	Contact Information	
	a. Email	
	b. Phone/text number	
	c. Best way to reach you	
4.	Event type:	
	a Lecture Lab Course name, building and room #	
	Start Time: A.M. or P. M. Stop Time:	
	b Lecture Lab Course name, building and room #	
	Start Time: A.M. or P. M. Stop Time:	
	c. Lecture Lab Course name, building and room #	
	Start Time: A.M. or P. M. Stop Time:	
	d. Lecture Lab Course name, building and room #	
	Start Time: A.M. or P. M. Stop Time:	
	e Lecture Lab Course name, building and room #	
	Start Time: A.M. or P. M. Stop Time:	—
	f. \Box Lecture \Box Lab Course name, building and room $\#$	
	Start Time: A.M. or P. M. Stop Time:	
	g. Clinical/internship hours In #6 additional information p	
	h Meeting with advisor Building and room #	
	i. Meeting with professor Building and room #	
	j. U Other Meeting In #6 additional information provide dat	tes, time, and location.
	k. Tutoring Course name:	
	1. Supplemental Instruction Course name:	
	m. Concert In #6 additional information provide dates, time, and location.	
	n. Off campus event description	
5.	Event Location:	

6. Additional Information _