

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

## **Campus Interpreter Request Form**

Request 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 and Student Accessibility Services as soon as possible.

Today's Date		
Name of person requesting an interpreter _		
Department:	Fund #	
Name of Deaf/HH client if known:		
a. Email		-
c. Best way to reach you		_
		Location:
Additional Information		
	Name of person requesting an interpreter _ Department:  Name of Deaf/HH client if known:  Contact Information  a. Email b. Phone/text number c. Best way to reach you  Event type: a. Date:	Name of Deaf/HH client if known:  Contact Information  a. Email  b. Phone/text number  c. Best way to reach you  Event type: