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| **INTERPRETER BOOKING REQUEST FORM** |
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| **Note:**  | An interpreter booking is for the nominated hearing date(s) only. For each additional hearing, a further request is required. |
|  |
| **Case details** |
|  |
| Court reference: |       |  |
| Name of case: |       |
| Jurisdiction: | [ ]   | Family division | [ ]   | Criminal division | [ ]  | Intervention order |
| Type of hearing: | [ ]   | Mention | [ ]   | Contest mention |
|  | [ ]   | Conciliation conference | [ ]  | Directions hearing |
|  | [ ]   | Readiness hearing | [ ]  | Contested hearing |
|  | [ ]  | Other [*specify*] |       |
|  |
| **Details of interpreter booking** |
|  |
| Name of person requiring interpreter: |       |
| Relationship to case: |       |
| Language: |       |
| Gender of interpreter preferred: |       |  |
| Court location: |       |  |
| Date(s) of hearing: |       |
| Time of hearing: |       |  |
| Duration: |        | hours | **OR** | [ ]   | Half day  | [ ]  | Full day |
|  |
| **Details of requesting person** |
|  |
| Name: |       |
| Email: |       |
| Agency: |       |
| Phone: |       | Date: |       |  |
| Signature: |       |  |

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| **REGISTRY USE ONLY** |
|  |
| Request received by: | [ ]   | Phone | [ ]  | Email |
| Request made to [*specify agency*] | [ ]   | On-Call | [ ]   | V.I.T.S. |
|  | [ ]  | VicDeaf | [ ]  | T.I.S. | [ ]  | Ethnic |
|  | [ ]  | Other [*please specify*] |       |
| Date: |       | Time: |       |  |
| Booking number: |       |  |
|  |
| If booking is cancelled, action taken: |
|  | [ ]  | Further request made to VITS [*date*] |       |
|  | [ ]  | Other [*please specify*] |       |