



King Philip Regional School District

School: _____

Request for Translation/Interpreter

Student's Name: _____

Parent's Name: _____

Address: _____

Language Spoken/Written _____

Are you in need of having school information translated into your first language?

☐ YES

☐ NO

Will you be in need of an interpreter available at a conference for translation?

☐ YES

☐ NO

Note: ESL teachers please include a copy of this form in the student's cumulative folder.