



CROTON-HARMON SCHOOLS

Translation Request Form

ALL DOCUMENT TRANSLATIONS NEED TO BE SUBMITTED A MINIMUM OF 10 DAYS IN ADVANCE

Date of Request: _____ School: _____ Grade: _____

Staff requesting document translation: _____

*List documents to be translated:

Translator needed:

Type of Meeting	Date	Time	Location

Approved

Not-Approved

Rachel DePaul, Signature and Date

***Directions: Scan form and email to kaylen.ward@chufsd.org along with word documents to be translated.**