



OXNARD SCHOOL DISTRICT

1051 SOUTH "A" STREET • OXNARD, CALIFORNIA 93030 • (805) 487-3918, ext. 2351

Department of English Learner Services

Translation Request Form Other Language

(Not for Spanish or Mixteco)

Use One Form per Appointment

SECTION 1: Prior to Appointment

(Site Contact Complete Section 1 and email to: amgutierrez@oxnardsd.org)

Today's Date _____ School: _____

School Contact: _____ Position: _____

Phone Number: _____ email: amgutierrez@oxnardsd.org _____

Requested date of Translator: _____ Appointment Time: _____

Please Select Type of Services: _____ Via Zoom: _____

Language Requested: _____

Purpose of Translation: _____ Estimated Amount of Time

Requested: _____

American Language Services is located in Los Angeles and charge by 1/2 day (up to 3 hrs) or full day (3-6 hrs).

Email to amgutierrez@oxnardsd.org in ELS Dept. for approval

SECTION 2: ELS Department Approval

Your request for a translator has been

_____ Approved for: 1/2-day full day

_____ Denied

Director Signature: _____ Date: _____

Email to: interpreting@alsglobal.net, School Office Manager, & Site Contact

SECTION 3: Appointment (Site Contact)

Site Contact: please contact American Language Services at (310) 829-0741 or email interpreting@alsglobal.net to set up and confirm your appointment.

SECTION 4: After Appointment

(Site Contact: Complete & email to amgutierrez@oxnardsd.org within 3 days of appointment)

The translator worked at _____ School on _____ Date

From _____ to _____
Time Time

Site Contact _____ Date _____