

Department of English Learner Services



Mixteco Interpretation Request Form
Indicate each appointment separately

SECTION 1: Prior to Appointment (Site Contact Complete Section 1 email to aalvarado@oxnardsd.org and nzarate@oxnardsd.org)

Today's Date: _____ School: _____

School Contact: _____ Position: _____

Phone Number: _____ E-mail: _____

Date of Interpretation Services Requested: _____

Appointment Time Requested: _____

Alternate Date/Time if 1st Choice is Not Available: _____

Purpose of Interpretation: _____

Estimated Amount of Time Requested _____

Please indicate Interpretation preference: Mixteco to English
 English to Mixteco

Email both aalvarado@oxnardsd.org and nzarate@oxnardsd.org in ELS Dept. for approval for requests during regular work hours: 8am-5pm.

Your request for a Mixteco interpreter has been:

Approved for _____ min./hrs.

Denied

Approved by: _____ Date: _____ Completed by: _____

SECTION 2-A: Approval (Site Contact)

Please contact aalvarado@oxnardsd.org and nzarate@oxnardsd.org to set up and confirm your appointment.

SECTION 2-B: Extra Hours Approval (Only needed when outside regular work hours: 8am-5pm)

Approved

Denied

Director Signature _____ Date: _____

Email to: aalvarado@oxnardsd.org or nzarate@oxnardsd.org , School Office Manager, & Site Contact

SECTION 3: After Appointment complete ONLY if interpreter is coming from MICOP.

(Site Contact: Complete & email nzarate@oxnardsd.org and aalvarado@oxnardsd.org within 3 days of appointment)

The interpreter from MICOP worked at _____ School on _____
Date

From _____ to _____
Time Time

Site Contact

Date