## In the Court of Common Pleas of Pike County

Commonwealth of Pennsylvania	:
	: Case number:
VS.	:
	:
	:
	:
Defendant/Respondent	:
Interpreter Re	quest Notice–Criminal/Juvenile

Interpreter services are hereby requested in the above captioned matter as follows:

Hearing Date:	e:Time:				
Courtroom:	Location: _				
Type of Case :					
Name of person requi	ring the interpre	eter:			
Scope of interpretatio	n: 🗆 Testimon	ıy	□ Entire Hearing		
Relationship to case:			□ other:		
Language (choose foreign or deaf and provide requested information):					
□ Foreign language s Dialect (if app	poken: plicable):				
□ Deaf/hard of hearing: □American Sign Language					
□ Other non-ASL type:					
Country of origin:	ountry of origin: Region/Province (if known):				
Please give a brief description of any particular condition which may affect or limit the communication skills of the person for whom the interpreter is requested:					
Print Requestor/Coun		Phone		Date	
Requestor/Counsel's					