



Administrative Form 1516
TRANSLATION REQUEST FORM

Responsible: Office of Academics: English Language Development

PROCESS

1. Translation will be completed on a first-come, first served basis. Requests for translation of documents that are over five pages in length require an appropriate length of time for completion. Contact the Translation Specialist for an estimated completion date.
2. Complete the following information:

Date: _____

Name: _____

Telephone: _____

Department: _____

Subject/Title of Document for Translation

News Release

Document / Article

Letter

Flyer

ConnectEd Announcement (written; oral)

Other, describe: _____

Date Needed (No ASAP). Please allow reasonable time: _____

Special Instructions:

3. Requests for translation of a District governing document, to include policy, regulations, procedures, manuals and forms, must be submitted through Vangie Russell, Project Manager lv Russell@washoeschools.net.
4. Submit all other translation requests to:

WCSD Translation Specialist
Margarita G. Griggs, M.A. Spanish
Department of English Language
Development
MGriggs@washoeschools.net

For Office Use Only: _____

Date Completed and Returned: _____