# How to Request a Sign Language Interpreter with DHHS/NE Metro 916

When requesting a **Sign Language interpreter** with DHHS services/NE Metro 916, please do the following:

- A.) Please send all interpreting requests to the following email address: ASL.Interpreting@nemetro.k12.mn.us
- B.) Please provide all of the **bolded** details noted in steps 1-7 below when you email in your ASL interpreter request (see example of a sample request below).

### Information needed in order for us to begin scheduling an Sign Language interpreter

- **1. Date(s)~** Please supply all of the dates that you will need services if there is more than one date. (Schedules and calendars that include all of the dates are greatly appreciated.
- 2. Time~ Start and end times
- **3. Location of Event ~** Complete physical address including zip code
- **4. Type of Event** ~ For example: Parent meeting, IEP meeting, play, workshop, open house, etc...
- **5. Services For** ~ Include the name or name(s) of the individuals requesting services. (Please note if it is for a parent we need both the parent's name and student's name for verification purposes)
- **6. Preferred Interpreter** ~ (If there is an interpreter at your site or that you know has worked with the consumer before, you may request them. HOWEVER, we can not guarantee that that particular person will be available).
- 7. Billing Information ~ (\*\*\*\*\*Please supply the complete billing information.)
  - \*Name of organization
  - \*Name of Contact at organization
  - \*Physical Address of organization
  - \*Phone and/or email for the organization.

It is extremely difficult to fill interpreting requests without the information provided above. By submitting all of the information it enables us to get started quickly without having to send additional emails to you asking for clarification or additional details.

#### Interpreter Request - EXAMPLE

Date(s)~ Monday, October 8, 2007

**Time~** 4:00-5:00pm

Location of Event ~Roseville Area Middle School, 15 County Road B2 East, Little Canada, MN 55117, Room 902

Type of Event ~ Parent/Teacher Meeting

Services For ~ Mrs. Hennedy, mom of Kaylen Hennedy

**Preferred Interpreter** ~ Annie Elias

Billing Information ~

Roseville Area Middle School, Karen Bell, District Office, Attn: Susie Johnson 123 Smith Street, Roseville, MN 55113, (651) 555-1111 or <a href="mailto:kbell@isd123.org">kbell@isd123.org</a>

## How the process works once we receive your request and begin the scheduling process:

- 1. Once we receive your ASL interpreting request with all the details as mentioned above, we will respond via email.
- 2. Once we are able to fill your request you will receive a follow-up confirmation email informing you of which interpreter(s) will be fulfilling that need.

### **CONFIRMATION Example**

Tammy Smith is available to interpret for the following request:

Date(s) ~ Monday, October 8, 2007

**Time ~** 4:00-5:00pm

Location of Event ~ Roseville Area Middle School, 15 County Road B2 East, Little Canada, MN 55117, Room 902

Type of Event ~ Parent/Teacher Meeting

Services For ~ Mrs. Hennedy, mom of Kaylen Hennedy

**Scheduled Interpreter** ~ Annie Elias was not available ~ Tammy Smith is available.

#### **Additional Details/Guidelines:**

**2** Weeks Notice of Services is Highly Preferred ~ If at all possible; please submit your requests 2 weeks in advance. We make every effort to fill every request that we receive, however, it is more difficult when we receive requests with short-notice.

2 hour minimum for all interpreting jobs ~ In general, jobs that last longer than 2 hours require 2 interpreters.

*Ongoing Activities, Clubs, Sports etc.* ~ Our goal is to provide consistency when we schedule an interpreter for on-going requests however, due to the availability of the interpreters we are not always able to have one interpreter available the entire time of the on going job.

On Site Interpreter's Role ~ We have many sites that have an interpreter at their location working with a student(s) during the regular school hours. Any meetings, activities, conferences above and beyond the normal school hours need to be requested through our office via email/phone (see details above). Please also be aware that although there may be an interpreter at your site during the day it does not automatically mean that they are available for the requests beyond the school hours.

*Cancellation Policy* ~ If you need to cancel any interpreting requests you must supply us with at least 24 business hour notice. Any cancellations that fall under 24 business hours notice will be billed.

# Deaf / Hard of Hearing Services

Capitol View Center, 70 W. County Road B2 Suite 205, Little Canada, MN 55117
Phone 651.415.5546
Fax 651.415.5509