

<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA</p> <p><input type="checkbox"/> 800 SOUTH VICTORIA AVE. VENTURA, CA 93009</p> <p><input type="checkbox"/> 3855 – F ALAMO ST. SIMI VALLEY, CA 93063-2210</p> <p><input type="checkbox"/> 4353 VINEYARD AVE, OXNARD, CA 93036</p> <p>INTERPRETING SERVICES, 805-289-8799  <a href="mailto:VCSCInterpreting@ventura.courts.ca.gov">VCSCInterpreting@ventura.courts.ca.gov</a></p>	<p>FOR COURT USE ONLY</p>
<p><b>REQUEST FOR INTERPRETER</b></p>	<p>CASE NUMBER:</p>

Fill out this form and submit it at least **10 days** before your hearing, or as soon as the hearing is set if less than **10 days**.

**Return this form to the clerk's office in Room 208 as soon as possible.**

All requests are evaluated in accordance with the priorities as set forth in *Evidence Code* §756.

**Contact Information of Person(s) Needing an Interpreter**

- 1. Name(s): \_\_\_\_\_
- 2. Phone number: \_\_\_\_\_
- 3. E-mail: \_\_\_\_\_
- 4. Language needed:    Spanish    Mixteco    ASL (American Sign Language)    Mandarin  
 Other: \_\_\_\_\_

**Court Hearing or Event**

- 5. Date: \_\_\_\_\_ Time: \_\_\_\_\_ Department: \_\_\_\_\_  
 Family Law    Civil    Small Claims    Probate    Unlawful Detainer
- I agree that if an interpreter is no longer needed I will immediately notify the interpreter's office.

**Name of Person Making this Request**

6. \_\_\_\_\_  
(First Name) (Last Name)

Date: \_\_\_\_\_