

SUPERIOR COURT ATLANTA JUDICIAL CIRCUIT EMERGENCY COURT INTERPRETER REQUEST FORM



Email to: SCA.Interpreters@fultoncountyga.gov

(***Please complete *entire* form - Incomplete forms cannot be processed)

Assignment Information				
Today's Date:	Your Name:	Phone #:	Phone #:	
Assignment Date(s):	Language:		Dialect:	
Check one: Jud	dge:	Courtroom (in-Person)	Department:	
JCT FCC JAIL ZOOM Other				
cation/Address:		Start Time (3	Start Time (30 minutes increments):	
			□ P.M.	
Zoom Video Remote Information (required)			minutes increments):	
Zoom Meeting ID:			□ P. M.	
Zoom Password is applicable:				
Onsite Contact Person:			Onsite Contact Phone #:	
Interpreting Services for:			# of Interpreters Needed (e.g. trials/motions etc)	
☐ Defendant ☐ Victim ☐ Petitioner ☐ Respondent ☐ Witness ☐ Other			(*2 hours or more requires 2 Interpreters)	
			Judge's Signature:	
Case Information				
Case/Civil Action # Party Name (who needs the services):				
Charge(s): Attorney: Public Defender				
			_	
Towns of Court		☐ Legal Aide	Other:	
Type of Case: □ Trial □ Bond Hearing □ Plea □ Divorce □ Pretrial □ Motions □ Prelim. Hearing □ All Purpose Hearing				
☐ 1 st Appearance ☐ Jail Interview ☐ Interview ☐ Intake ☐ 12 Month Status ☐ Temporary Protective Order (TPO) ☐ Ex Parte				
Interpretation/Translation Needed: Please indicate which services are needed below.				
☐ Oral Interpretation Only ☐ Written Document and/or Text Translation Only ☐ Both Oral Interpretation and Written Document and/or Text Translation				
☐ Video ☐ Audio Who is in possession of the video/audio media?				
** At least 24 hours' notice for video/audio, if possible. **				
Signature:				

- 1. Please complete this form and email it to sca.interpreters@fultoncountyga.gov
- 2. The Interpreter Assignment Coordinator will confirm the appointment with the requesting personnel via a calendar request in Outlook.

Phone Number: (404) 612-4518
