Intake #
22-

2021-2022 INTERPRETATION INTAKE FORM

Please email this form to: LPASintakes@nasboces.org

INTERPRETATION FOR:

- ☐ CPSE/CSE Meeting
- ☐ Disciplinary Meeting
- ☐ Evaluation _____
- ☐ Family Meeting
- ☐ Graduation
- ☐ Parent/Teacher Conference
- ☐ Superintendent's Hearing
- ☐ Testing _____
- ☐ Large Group Meeting (Community Forum, Informational, PTA, etc.)
  Title of Meeting:
  _____
- ☐ OTHER: _____

Date:_____

Time:_____
(Please indicate exact time needed for meeting)

Estimated Duration:_____

Meeting Site:_____

Address:_____

☐ **Paperwork is required from family.**
Telephone # _____

☐ **We need the interpreter to advise family of this meeting**

24 HOUR CANCELLATION NOTICE NEEDED OR DISTRICT WILL BE CHARGED

Student Name	Grade	Language	Gender
			☐ Male ☐ Female

District	School

Contact Person to Confirm Appointment:	Phone Number	Email

Designated Administrator's Approval:

_____ _____
Print Name **Signature**

Position: _____ Phone #_____ Email: _____

Consultant Approved:

LOI Approved:

Date: _____

nassau BOCES Board of Cooperative Educational Services

Language Programs and Assessment Services
One Merrick Avenue, Westbury, NY 11590 • (516) 396-2256 • **www.nassauboces.org/lpas**

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PLEASE USE THIS ADDITIONAL PAGE IF NEEDED FOR TESTING

Please fill out an intake form for <u>each</u> interpreter you are requesting for testing

NAME OF STUDENT(S)	GRADE	IEP/504 ACCOMODATIONS