**EMERGENCY INTERPRETING SERVICES (CONFERENCE CALL) FOR**

**BGSU POLICE DEPARTMENT**

**AFFILIATE REGISTRATION FORM**

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| **Contact Information** |
| First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone Number (cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(work)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Language(s) to and from English** |
| Please indicate the language you are able to interpret to and from English:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Availability** |
| Please indicate the time you are available to provide the services (please check all that apply):\_\_12:00am-8:00am\_\_ 4:00pm- 6:00pm\_\_ 6:00pm- 8:00pm\_\_ 8:00pm- 10:00pm\_\_ 10:00pm-12:00am\_\_\_ 8:00 am-10:00am \_\_ 10:00am- 12:00pm \_\_ 12:00pm-2:00pm\_\_ 2:00pm-4:00pm |

**Please return the completed form to the Language Services Group via Email:**

**lsg@bgsu.edu**