**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**](mailto:lsg@bgsu.edu)