

Interpreter Request Form

Current DRC Students Only

The Disability Resource Center hires sign language interpreters to provide accommodations to Berkshire Community College (BCC) students who are deaf or hard of hearing. These services are available for all academic needs, meetings, workshops, etc., as well as for any other activities sponsored by the College.

If you are not registered with the Disability Resource Center and plan to attend an event or visit the campus, please do not complete this form; instead, contact the coordinator of the event.

Please note, requests for interpreters should be made with as much advance notice as possible. Requests which do not allow at least two weeks advance notice increase the possibility that interpreters will be unavailable.

Instructions

If you are requesting a sign language interpreter for a meeting, forum, tutoring or school related activity other than your regularly scheduled classes, please complete sections 1 to 3. To request an interpreter for your classes, please skip sections 1 and 2 and complete sections 3 and 4.

Email completed form to pfarron@berkshirecc.edu or bring it to the Disability Resource Center in SBA 118.

1. Event Details

Type of Event:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Tutoring | <input type="checkbox"/> Forum |
| <input type="checkbox"/> Service Learning | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Meeting | |

Description of event: _____

Location of event (provide address if off campus and building/room number if on campus): _____

Name and contact number of the person with whom you will be meeting: _____

2. Date and Time Details

Date the interpreter is needed: _____ Day of the week: _____

Start time: _____ End time: _____ Will this be an ongoing meeting? ☐ Yes ☐ No

Will it meet more than once per week? ☐ Yes ☐ No If yes, specify additional dates and times:

Is there anything else you want us to know? _____

3. Student's Information

First Name: _____ Last Name: _____

Student ID Number: _____

BCC Email Address: _____

Phone Number: _____

Interpreter Specifications:

☐ American Sign Language

☐ Signed English

☐ Oral Transliteration

4. Course Information

Course 1

Professor (First Initial, Last Name): _____

Course Code and Section (i.e., ENG101-02): _____

Course 2

Professor (First Initial, Last Name): _____

Course Code and Section (i.e., ENG101-02): _____

Course 3

Professor (First Initial, Last Name): _____

Course Code and Section (i.e., ENG101-02): _____

Course 4

Professor (First Initial, Last Name): _____

Course Code and Section (i.e., ENG101-02): _____

Course 5

Professor (First Initial, Last Name): _____

Course Code and Section (i.e., ENG101-02): _____