UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

Application For CART Or Sign Language Interpreter

IMPORTANT: Please apply for these services as far in advance of the date needed as possible.

Name:
Email Address:
Daytime phone number:
I am a:
☐ Prospective Juror
☐ Party
☐ Witness
☐ Attorney
Other (please specify and provide brief explanation):
Because I am Deaf or Hard of Hearing, I will need a: CART (Communications Access Realtime Translation) interpreter Sign language interpreter Either a CART or a sign language interpreter Other communication/auxiliary aid or services (please specify):
Case information (if applicable):
Case Name:
Case Number: Judge:
Proceeding Date/Time/Courtroom No.:
Type of court proceeding for which interpreter services are requested (e.g. motion
hearing, trial:
Date: Signature:

Submit this application:

- by <u>email</u> to the Disability Access and Accommodation Coordinator for the courthouse in question (see <u>cand.uscourts.gov/access</u> for details) **or**
- by <u>US mail or personal delivery</u> to Access Coordinator, Office of the Clerk, United States District Court, 450 Golden Gate Avenue, San Francisco, CA 94114.