



Request for Sign Language Interpreting and Captioning Services

HOURS OF OPERATION

DRC Interpreting & Captioning
Monday – Friday, 8:30 AM – 4:30 PM Eastern Time
Email: DRC.Interpreters@dot.gov

INSTRUCTIONS:

- Download this form and complete it using Adobe Acrobat. Otherwise, the submit button will not route the request to DRC.Interpreters@dot.gov.
- Requests are processed on a first come, first serve basis so it is important to submit your request as soon as possible to increase the likelihood that it will be filled, ideally no later than five business days in advance of the meeting or event.
- Submitting this service request affirms that this is a reasonable accommodation for a DOT employee or applicant for an official government-sponsored meeting, activity, or program.

Type of Interpreting Request

- Video Remote Interpreting (Online)
- On Site Interpreting (In Person)

Type of Captioning Request

- Remote (Online)
- On Site (In Person)

Person Requesting Services/Point of Contact

Name	Phone	Email	DOT Mode

Additional Point of Contact

Name	Phone	Email	DOT Mode

DOT Employee/Applicant Receiving Services

Name	Phone/Videophone	Email	DOT Mode

Role of DOT Employee/Applicant Receiving Services

	If other, please describe.
Type of Interpreting Needed (Confirm with Customer)	

Do Other DOT Employees/Applicants Need Services for This Meeting/Event?

Yes Provide names, contact information, and other important information.

No

Meeting/Event Information

Frequency of Request:

Date(s) Service(s) Needed:

Start Time:	End Time:	Time Zone:
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Meeting/Event Type:	If other, please describe.
Title of Meeting/Event**:	
Additional Details:	

In-Person Meeting Location

Street Address:
Room Number:
City, State, Zip:

Online Meeting Information

Meeting Platform Type:	If other, please specify.
Call-in Number & Passcode (if available):	
Web Meeting Hyperlink:	

**** Remember to email handouts, agenda, and/or PowerPoint slides to DRC.Interpreters@dot.gov prior to the meeting/event. ****