



Wesley Interpretation Services
TRANSLATION REQUEST FORM

Date Submitted:

Organization & Program:

Address:

Contact Person:

Phone Number:

TRANSLATION REQUEST DETAILS

Language of Document:

Language of Translation:

Certified Preference:

Certified

Non-Certified

N/A

Completion Date:

Method of Document Delivery:

Type of Document:

Quote Requested:

Yes

No

Additional Notes:

Please email the request to interpretation.services@wesley.ca
 For more information please call 905-528-5629 ext. 302

For Administration

Approval Signature: _____ Date Approved: _____ Interpreter Assigned: _____

Interpreter Rate: _____ Service Provider Rate: _____ Program Code: _____