

Application for Appointment of a Court Interpreter in a Civil or Criminal Case

A separate application should be submitted for each party who needs an interpreter and for each witness or group of witnesses who speak the same foreign language.

To request appointment of a translator to do a **written translation** of a court-related document or audio or video recording, use the form titled "Application for a Written Translation of Court-Related Material."

Note: If a person needs an interpreter for services provided by other government agencies, contact the agency. For example: **Department of Corrections** for a presentence investigation; or **Department of Human Services** for services to parents or youth involved in juvenile court. The agency will schedule and pay the interpreter.

In the Iowa District Court for _____ County <i>County where you are filing this Application</i>	
<hr/> Plaintiff/Petitioner <i>Full name of Plaintiff/Petitioner</i> vs. <hr/> Defendant/Respondent <i>Full name of Defendant/Respondent</i>	Case no. _____ Application for Appointment of a Court Interpreter in a Civil or Criminal Case Iowa Court Rule 47.3(2)

1. Name of Applicant submitting this Application: _____
First Last
- A. Contact Information
- (1) Phone #: (_____) _____
- (2) Email: _____
- B. Applicant is: *Check all that apply*
- (1) ☐ Attorney for Plaintiff or Petitioner
- (2) ☐ Attorney for Defendant or Respondent who is: *Check one*
- a. ☐ a public defender
- b. ☐ court-appointed, paid by state
- c. ☐ hired and paid by my client.
- (3) ☐ Plaintiff or Petitioner without an attorney
- (4) ☐ Defendant or Respondent without an attorney
- (5) ☐ Other: _____

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2. Name of person who needs a court interpreter:

First _____ *Last*

If submitting an application for an interpreter for multiple witnesses who speak the same foreign language, list the additional witnesses' names (*attach an additional sheet if necessary*) :

3. The person identified in section 2 needs:

A. ☐ An *oral* language interpreter of: (1) ☐ Spanish (2) ☐ Other: _____

Note: Specify dialect, if any (e.g., Sudanese Arabic) _____

B. ☐ An American *Sign* Language interpreter

C. ☐ A real-time translation of spoken words into typed English on a computer or TV screen (for a hearing-impaired person)

D. ☐ Other: *Explain* _____

4. The person in this Application who needs an interpreter is a: *Check all that apply*

A. ☐ Plaintiff or Petitioner.

B. ☐ Witness for Plaintiff or Petitioner.

C. ☐ Defendant in a criminal case.

D. ☐ Other Defendant or Respondent.

E. ☐ Witness for Defendant or Respondent.

F. ☐ Other: *Explain* _____

5. Next date and time the language service will be needed (*if known*):

_____, 20_____, at _____:_____
Month *Day* *Year* *Time* ☐ a.m. ☐ p.m.

6. Expected length of proceeding (*check one*)

☐ Up to four hours.

☐ More than four hours (two interpreters needed; see ICR47.3(12)(b)).

7. Location where the language service will be needed (*if known*):

☐ _____ County Courthouse, courtroom _____, or
County *Courtroom number*

☐ Other: _____

8. Other Information:

9. **Applicant's Request and Certification:** Applicant requests that the court approve the language service requested in section 3 above for the person identified in section 2 above. Applicant certifies, to the best of Applicant's knowledge, that the person identified in section 2 has limited or has no ability to speak or understand the English language.

/s/ _____
Applicant

Law firm, if applicable

Mailing address

Telephone number

Email address

Additional email address, if applicable