

BILINGUAL LANGUAGE SERVICES INTERPRETATION (SPOKEN) REQUEST

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Complete and submit this form at least **10 business days** prior to the event and include any reference document(s) for the interpreter’s review to the [Bilingual Services Coordinator](#) Equal Employment Opportunity (EEO) Office. If you need assistance completing the form or have any questions, email: EEOP@arb.ca.gov.

Division/Branch:	Today’s Date:
Requestor’s Name:	Requestor’s Number:
Division Chief’s Name:	Division Chief’s Signature:

Event Description:			
<input type="checkbox"/> Board Meeting	<input type="checkbox"/> Seminar	<input type="checkbox"/> Exam	<input type="checkbox"/> Training
<input type="checkbox"/> Interview	<input type="checkbox"/> Workshop	<input type="checkbox"/> Public Meeting	<input type="checkbox"/> Other:
<input type="checkbox"/> Virtual Meeting (Zoom)	Environment/room description:		
Language:			
<input type="checkbox"/> Spanish	<input type="checkbox"/> Punjabi	<input type="checkbox"/> Hmong	<input type="checkbox"/> Korean
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> French	<input type="checkbox"/> Cantonese (Chinese)	<input type="checkbox"/> Mandarin (Chinese)
<input type="checkbox"/> Sign Language	<input type="checkbox"/> Other:		
Interpretation Service:			
<input type="checkbox"/> Webcast/Record	<input type="checkbox"/> Consecutive (repeated)	<input type="checkbox"/> Simultaneous (concurrent)	<input type="checkbox"/> Other:

EVENT LOCATION

Provide a copy of the agenda and/or public notice of the event.

Name/Title of event:	Event Hours:
Event Address (City/State/Zip) (include room, name, or number):	Event Date(s):

LOGISTICS OF EVENT

Was there a request from the public for interpretation service? If yes, please attach a copy of the public request to this service request.
If no, justify the request for services.

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Approximate number of attendees:

Expected number of Limited English Proficient (LEP) attendees:

FOR OFFSITE LOCATIONS

Provide the CARB Point of Contact Information:

Name:

Office Number:

Mobile Number:

Email:

NOTE: All interpretation equipment needs to be requested from the OIS Service Desk.