In the Court of Common Pleas of _____ County

_____ : Case number: _____
:
Vs. :
:
_____ :

Interpreter Waiver Form

Name of party waiving the services of an interpreter: _____
(Print name)

Relationship to case: ☐ Defendant/Respondent ☐ Plaintiff/Petitioner ☐ Witness ☐ Victim
(Check one)
☐ Parent/Person *in loco parentis* ☐ Other: _____

Primary language spoken: _____ Secondary language: _____

I, the undersigned, have been advised by the court of my right to have an interpreter present, at no cost to me, for the duration of this court proceeding to assist me in fully participating and understanding the proceeding.

Through the services of the interpreter provided by the court (pursuant to 204 Pa. Code § 221.105), I hereby knowingly, voluntarily, and intelligently choose to waive my right to have an interpreter present to assist me during these proceedings.

I understand that if, at any time during the proceeding, I need an interpreter, one will be provided if I ask the court for an interpreter.

_____ _____
Signature of party waiving the interpreter Date

_____ _____
Signature of Counsel for party waiving the interpreter (*If applicable*) Date

_____ _____
Signature of the Presiding Judicial Officer Date

Must be Completed by Court Staff

Interpreter Name/Agency Used: _____

Interpreter Service Mode: ☐ In Person ☐ Video Remote ☐ Telephone