

## Hong Kong Christian Service CHEER

### Simultaneous Interpretation Service (SIS) Request Form

Please complete this form together with your agency's chop and your signature to **fax (No.:3106 0455) or email (tis-cheer@hkcs.org)** at least **21 working days in advance**. We will reply you via email within 7 working days.

Information you provide will be disclosed to our assigned interpreters and authorized staff of CHEER for the purpose of following up your request.

<b>Case Reference number:</b> _____ <i>*This number will be issued by CHEER.</i>	<b>Agency code(If Any):</b> _____ <i>*This code will be assigned by CHEER</i>
<b>Type of Organization:</b> <input type="checkbox"/> Education Bureau <input type="checkbox"/> Department of Health <input type="checkbox"/> Housing Department <input type="checkbox"/> Immigration Department <input type="checkbox"/> NGO <input type="checkbox"/> School <input type="checkbox"/> Social Welfare Department <input type="checkbox"/> Others: _____	
<b>Organization Information: (Compulsory for organizations without Agency Code)</b> <b>Name:</b> _____ <b>Unit/ Section:</b> _____ <b>Address:</b> _____ <b>Tel:</b> _____ <b>Fax:</b> _____	
<b>Enquirer Information:</b> <b>Name:</b> _____ <b>Post:</b> _____ <b>Email:</b> _____ <b>Tel (If different from above):</b> _____ <b>Fax (If different from above):</b> _____	
<b>Service User Information: (Please attach an attendance list if available)</b> <b>Name:</b> _____ <b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <b>Language Spoken:</b> <input type="checkbox"/> Bahasa Indonesia <input type="checkbox"/> Hindi <input type="checkbox"/> Nepali <input type="checkbox"/> Punjabi <input type="checkbox"/> Tagalog <input type="checkbox"/> Thai <input type="checkbox"/> Urdu	
<b>Date needing SIS:</b> <b>Date</b> _____ (DD)/ _____ (MM)/ _____ (YY) <b>Time :</b> _____ AM/PM to _____ AM/PM <b>Meeting Place:</b> _____ (room) _____ (floor) _____ (building) _____ (street/road), _____ (district), <input type="checkbox"/> New Territories <input type="checkbox"/> Kowloon <input type="checkbox"/> Hong Kong <b>Contact Person (If different from above):</b> _____ <b>Contact no. on SIS appointment date:</b> _____ <b>Preference of interpreter:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Either	
<b>Background information about the assignment</b>  <i>(Please fax relevant materials such as application form together with this form if appropriate. CHEER reserves the right to decline an assignment which requests our interpreters to sign any documents on-site)</i>	
<b>Payment methods</b> <input checked="" type="checkbox"/> the appropriate statement	<b>Payment fee will be paid</b> <input type="checkbox"/> by cash to CHEER's interpreter <input type="checkbox"/> by cheque to CHEER's interpreter <input type="checkbox"/> by cheque sent to CHEER's office
<b>Operation hour : <i>HK\$150 per hour for Government Departments / NGOs / Public Social Service units / Schools</i></b> - The charge of SIS is counted in 30 minutes per unit i.e.HK\$75 (for 30 minutes during operation hour) - Minimum time for a SIS is 30 minutes; time less than 30 minutes will be counted as 30 minutes. - If the SIS finishes prior to the scheduled ending time, full payment will be charged. - Availability and fee for any request for SIS during anytime out of the above operation hours will be considered case by case. Normally, a higher rate will be charged for service provided in non-operation hours. - Please contact us to confirm availability of the interpreter if the scheduled SIS is expected to overrun. We may not be able to give interpretation support during the extended period if no prior notice is made. Services provided during the extended period will be charged accordingly. <b>If you need an invoice, please tick here</b> <input type="checkbox"/> <span style="float: right;"><b>If you need an official receipt, please tick here</b> <input type="checkbox"/></span>	
<b>Office Use Only</b>	<b>Confirmed SIS by:</b> _____ <b>on</b> _____ <b>(Date) at</b> _____ <b>(Time)</b> <b>Name of Interpreter booked:</b> _____ <b>Service charge:</b> _____

Interpretation will be between English and one of the EM languages.

Signed by : \_\_\_\_\_  
 Name of Officer : \_\_\_\_\_  
 Date : \_\_\_\_\_

Agency Chop: