**Appendix V: EIS Request Form(即場傳譯服務申請表)**

**Hong Kong Christian Service CHEER**

**On-site (Escort) Interpretation Service (EIS) 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 **3 working days in advance**. We will reply you via email within 24 hours.

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

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| **Case Reference number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *\*This number will be issued by CHEER.* | | | | **Agency code(If Any):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  \*This code will be assigned by CHEER | | | |
| **Type of Organization:** 🞏 Education Bureau 🞏 Department of Health 🞏 Housing Department 🞏 Immigration Department 🞏 NGO  🞏 School 🞏 Social Welfare Department 🞏 Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| **Organization Information: (Compulsory for organizations without Agency Code)**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unit/ Section: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | |
| **Enquirer Information:**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Tel (If different from above):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax (If different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | |
| **Service User Information: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: □ Female □ Male**  **\*Language Spoken: □ Bahasa Indonesia □ Hindi □ Nepali □ Punjabi □ Tagalog □ Thai □ Urdu**  **(\*Refer to Important Notes) □ Vietnamese** | | | | | | | |
| **Date needing EIS:**  **Date \_\_\_\_\_\_(DD)/\_\_\_\_\_\_(MM)/\_\_\_\_\_\_(YY) Time : \_\_\_\_\_\_\_\_\_ AM/PM to \_\_\_\_\_\_\_\_\_ AM/PM**  **Meeting Place: \_\_\_\_\_\_\_\_(room)\_\_\_\_\_\_\_\_(floor) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(building) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(street/road),**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(district), □ New Territories □ Kowloon □ Hong Kong**  **Contact Person (If different from above):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact no. on EIS appointment date: \_\_\_\_\_\_\_\_\_\_\_\_\_**  **Preference of interpreter: □ Female □ Male □ Either** | | | | | | | |
| **Background information about the assignment**  *(Please fax relevant materials such as application form together with this form if appropriate)* | | | | | | | |
| **Payment methods**  **(🗸 the appropriate statement)** | | | **Payment fee will be paid □ by cash/ cheque to CHEER’s interpreter**  **□ by cheque sent to CHEER’s office** | | | | |
| **IMPORTANT NOTES:**  **EIS is to convey messages from English to the requested spoken language and vice-versa during interpretation session. Sight interpretation from EM languages to English & translation between English to EM languages will not be rendered.**  Operation hour: ***HK$ 60 per hour for Government Departments (Fees are waived- For NGOs and Schools)***  Non-operation hour: ***HK$100 per hour for Government Departments (Fees are waived- For NGOs and Schools)*** (non-operation hour rates appies to session starts or ends outside of our operation hours)  *- The charge of EIS is counted in 30 minutes per unit i.e.HK$30 (for 30 minutes during operation hour) and HK$50 (for 30 minutes during non-operation hours).*  *- Minimum time for an EIS is 30 minutes, time less than 30 minutes will be counted as 30 minutes. If the EIS finishes prior to the scheduled ending time, full payment will be charged.*  *- Please contact us to confirm availability of the interpreter if the scheduled EIS 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.*  *- If more than 1 EIS will be conducted by the same interpreter on the same date, you are suggested to arrange a 10-minute break between each EIS.*  *- To ensure the best quality of interpretation, each EIS should not last more than 1.5 hour.*  **If you need an invoice, please tick here □ If you need an official receipt, please tick here □** | | | | | | | |
| **Office Use Only** | | **Confirmed EIS by: \_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_(Date) at \_\_\_\_\_\_\_\_\_\_\_(Time)**  **Name of Interpreter booked:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Service charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| Signed by | : |  | | |  | Agency Chop: |
| Name of Officer | : |  | | |  |
| Date | : |  | | |  |