

**Xavier University of Louisiana
Office of Disability Services
1 Drexel Drive – Box 180
New Orleans, LA 70125**

**Office: (504) 520-7607
Fax: (504) 520-7917**

INTERPRETER SERVICES REQUEST FORM

Student: _____ **Term:** Fall 20__ Spring 20 __ Summer 20__

Id#: _____ **Contact #:** _____ **Email:** _____

This form is to request one event or one event with a recurring date. A recurring event would be an event that happens at the same day/time weekly and/or monthly. The event itself does not change (lecture, class, meeting, lab, etc.) it is just a recurrence of that event.

If you have more than one event you need interpreting services for, you will need to submit a request for each event.

All request must be received one (1) week before the scheduled event. We cannot guarantee an interpreter if the request is received less than 5 business days before the event. If you need to cancel the interpreter after a request is made, you must notify Office of Disability Services (ODS) 48 hours in advance of the event at (504)520-7607 or disabilityservices@xula.edu.

(Please check all boxes that apply):

Date of Request: _____