



Book Ogdensburg City School District
 Section 1000
 Title INTERPRETERS FOR HEARING-IMPAIRED PARENTS
 Code 1925-E.1
 Status First Reading
 Last Revised May 14, 2024

Accommodation Request

Parents in need of interpreter services are asked to complete this form:

TO: Superintendent of Schools _____ School District

FROM: _____

Name

Address

Please identify the type of interpreter needed:

___ Interpreter for the Hearing Impaired: () American Sign; () English

In the event an interpreter is not available, please identify the type of alternative service preferred:

___ Written Communication

___ Transcripts

___ Decoder

___ Telecommunication Device for the Deaf (TDD)

___ Other (please specify)

Adoption date: