



Book Ogdensburg City School District

Section 1000

Title INTERPRETERS FOR HEARING-IMPAIRED PARENTS

Code 1925-E.1

Status Proposed

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: