

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

Application For CART or Sign Language Interpreter

IMPORTANT: Please apply for these services as far in advance of the date needed as possible.

Name: _____

Email Address: _____

Daytime phone number: _____

I am a:

- Prospective Juror
- Party
- Witness
- Attorney
- Other (please specify and provide brief explanation):

Because I am Deaf or Hard of Hearing, I will need a:

- CART (Communications Access Realtime Translation) interpreter
- Sign language interpreter
- Either a CART or a sign language interpreter
- Other communication/auxiliary aid or services (please specify):

Case information (if applicable):

Case Name: _____

Case Number: _____ Judge: _____

Proceeding Date/Time/Courtroom No. : _____

Type of court proceeding for which interpreter services are requested (e.g. motion hearing, trial): _____

Date: _____

Signature: _____

Submit this application:

- by email to accommodations@cand.uscourts.gov **or**
- by US mail or personal delivery to Access Coordinator, Office of the Clerk, United States District Court, 450 Golden Gate Avenue, San Francisco, CA 94114.