Request Form for Interpretation or Translation Service

SCIA Human Resource Bank for Interpreters/Translators

Interpretation • Translation (Circle either service you request) File No.

OP	Maria	
Client	Name:	
Date of Birth	(MM/DD/YYYY)/	
Sex (Circle)	Male / Female	
Contact Information	Zip Code: Address:	
	Tel. No. (home) :	
	Cell No.:	
	Fax No.:	
	Email Address:	
(1) Interpretation Service	Date (MM/DD/YYYY):/	
Expected Time of Service:	From (AM · PM) To (AM · PM)	
Place:	Name of Facility: Address: Parking availability: yes / no	
	*As a rule, interpretation service should be maximum 2 hours, and 2,000 yen should be payable to the interpreter as reimbursement of costs incurred. You as the client need to pay 2,000 yen to the interpreter directly on the day the service was provided.	
(2) Translation Service	Volume of Translation: Size of paper: A4 pages	
	Due Date (MM/DD/YYYY):	
	*Due date must be weekdays.	
	*As a rule, translation fee per a page of A4-size is 3,000 yen/page, payable to the	
(2) Contents of Translation	translator by the client. Fees may vary depending on the size and contents. Appropriately describe the contents of interpretation or translation you request.	
(3) Contents of Translation or Interpretation	e.g.) Translation of regular documents to be submitted to the local government office.	
Agreement/Signature	The interpretation/translation services provided by the registrant of human resource bank of SCIA are based on the volunteer spirit; therefore, SCIA and the registrant will assume no responsibility for any trouble, damage or problem which may be caused during or after the service. Any personal information such as phone number exchanged between the client and the registrant must not be used and must be deleted immediately upon completion of the service. I hereby agree to the above statements and submit this form. Signed by:	
*協会使用蘭	□内容確認 □希望日時 □承認欄記入 □マッチング連絡 未・済み	
	対応通訳・翻訳者 受付者印	

対応通訳・翻訳者	受付者印