**Interpretation/Translation Request Form**

Attn: Chairman of the Saga Prefecture International Relations Association

Date:　　　　　　　　　　　(YYYY-MM-DD)

Information of person filing the request

|  |  |  |
| --- | --- | --- |
| Katakana  Name |  | |
| Corporation/company name |  | |
| Address | 〒 | |
| Contact information | Tel. | E-mail |

Content of the request

|  |  |  |  |
| --- | --- | --- | --- |
| Type of request | | Interpretation　　　　　　　　　　Translation | |
| Name of project | |  | |
| Content of the request | |  | |
| I  n  t  e  r  p  r  e  t  a  t  i  o  n | Language | ⇔　　　　　　　　　（　　　　　　）people | |
| Date and time of activity | (YYYY-MM-DD)　　　:　　　～　　: | |
| Location | Name of facility |  |
| Address |  |
| Tel. |  |
| Remuneration/  compensation of transportation fees | Remuneration　　Yes　（￥　　　　　　）　　　　No  Compensation of transportation fees  Yes　（￥　　　　　　）　　　　No  Method of payment　 Cash　 Bank transfer　 Other（　　　　）  My Number 　 Required　　 Not required | |
| T  r  a  n  s  l  a  t  i  o  n | Language/word count | →　　　　　　　　（　　　　　　　）characters/words | |
| Deadline | (YYYY-MM-DD) | |
| Remuneration | Remuneration　　Yes　（￥　　　　　　）　　　　No  Method of payment　 Cash　 Bank transfer　 Other（　　　　）  My Number 　 Required　　 Not required | |
| Method of delivery | E-mail　　 In-person-delivery　　 Delivery via postal service  Other（　　　　　　　　） | |
| Other specifics | |  | |

P.T.O.

≪Interpretation≫

Please attach any reference material, such as an outline of the project/event

≪Translation≫

Please attach the document to be translated.

Note that the provided documents shall not be returned, so please refrain from submitting any originals.

For applications or inquiries

**Saga Prefecture International Relations Association**

**TEL 0952-25-7921 　 　FAX 0952-26-2055　　E-mail** info@spira.or.jp