



Georgia Department of Human Services
LEP/SI
 Translation Request Form

Date submitted to LEP/SI	
Office: _____	Job Title/Form Name: _____
	Desired delivery Date: _____
Contact Person: _____	Telephone Number: _____
Address: _____	Fax Number: _____
_____	E-mail Address: _____
Division/Office _____	
Program: _____	

Format	
Original Language: _____	What service(s) are you requesting?
Translated Language(s):	Check all that Apply:
<input type="checkbox"/> Spanish	<input type="checkbox"/> Translating
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Proofreading
<input type="checkbox"/> Russian	<input type="checkbox"/> Formatting
<input type="checkbox"/> Korean	<input type="checkbox"/> Desktop Publishing
<input type="checkbox"/> Chinese	<input type="checkbox"/> Other:
<input type="checkbox"/> Other:	
To be completed by LEP/SI Office:	
Completed date: _____	

NOTE: It is the responsibility of the Division/Office staff to secure the necessary approvals before submission to the LEP/SI Program Office for translation. Approvals may be required from within the Division/Office, Office of Communications and or from the Legal Office.

**Georgia Department of Human Services
LEP/SI Program**

Translation Request Form (TRF)
Instructions

1. Write the date the request is submitted to the DHS LEP/SI Office.
2. Include contact information (including telephone and FAX numbers, mailing and e-mail addresses, Division/Office) for person submitting the request.
3. On the right side, enter the complete name of the document and the date the completed translation is desired (allow time to secure the necessary approvals and Purchase Order).
4. In the format section, indicate the language(s) for the translation and the services desired (translation, proofreading, formatting, desktop publishing, etc.). Check all that apply. Include other services desired that are not listed.
5. Submit the completed form to the LEP/SI Office via e-mail with a copy of the document to be translated also known as the source document.
6. Upon receipt of the request by the LEP/SI Office, the document will be sent to at least three approved translation vendors for quotes. The contact information for the vendor with the lowest quote will be forwarded to the Division/Office to obtain a Purchase Order (PO). **Each requesting Division or Office is responsible for covering the cost associated with translating documents.**
7. Upon confirmation of a PO, the LEP/SI staff will authorize the translation to be completed.
8. The completed translation is sent from the vendor to the LEP/SI staff who will forward to the appropriate Division/Office for review.
9. Upon the satisfactory completion of the translation in the appropriate format, the LEP/SI staff will authorize the final approval of the document from the vendor.
10. Each Division/Office is required to maintain a list of all translated documents including the date translated and the vendor providing the translation services. The LEP/SI Program Office also maintains a listing of translated documents.

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