

Waiver of Rights to Free Interpreter Services

Free interpreter services are available through agencies of the Georgia Department of Human Services (DHS). DHS will call an interpreter after identifying the primary language in which you are able to communicate. You are entitled to bring your own interpreter, however, DHS or its subsidiary agencies will not authorize payment for interpreters not previously secured or approved by DHS.

I, _____, have been informed of my right to receive free interpretive
(Customer Name)

services from _____. I understand that I am entitled to
(DHS/Agency)

interpretive services at no cost to myself or to other family members, but do not wish to receive

DHS's free services at this time. I choose _____ to act as my
(Interpreter's Name)

interpreter from _____ until _____.
(Date) (Date)

I understand that I may withdraw this waiver at any time and request the services of an

Interpreter, which will be paid for by _____.
(DHS/ Agency)

To the best of my knowledge, the person I am using to act as my own interpreter is over the age of 18 or older. I understand that this waiver pertains to interpreter services only and does not entitle my interpreter to act as my Authorized Representative. I also understand that the service agency may secure a qualified or certified interpreter to observe the interpreter of my choice during the interpreting session to ensure the accuracy of the communication and follow-up instructions.

The interpreter identified below orally translated this form to me.

(Customer's Signature) (Date)

(Interpreter's Signature) (Date)

(Interpreter Printed or Typed Name and Signature) (Date)

(Staff Person Signature) (Date)