SLOUGH TRANSLATION AND INTERPRETING SERVICE
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STAIS

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INTERPRETING BOOKING FORM

Part A: (to be completed by person making the booking) **Today's Date**: _____

Requested By: _____ **Position** _____

Department/Organisation: _____

Invoice address: _____

_____ **Tel:** _____ **Fax**: _____

Date of interview:_____ **Venue:** _____

Time: _____ **Language / Dialect** _____

Name & position of Professional name: _____

Client's name: _____ **Sex: M ❑F ❑** **Sex of interpreter requested: M ❑F❑**

Purpose of interview:_____

Client's age range: **0-16 ❑** **16-25 ❑** **25-39 ❑** **40-65 ❑** **65+ ❑**

Does the Client considers himself to have a disability:Yes❑No❑ If yes please specify _____

_____

Ethnicity: Pakistani❑ **Indian❑** **Sikh❑** **Black African❑** **Black Caribbean❑**
White British❑ **Travellers❑** **A8❑** **Others❑**

Part B. **Interpreter's name:** _____

Interpreter's T/T: _____**W/T:** _____ **Mileage / travel cost:** _____

*** Please attach bus / train tickets.**

Part C: (to be completed by the professional using the interpreter)

Assignment date: _____ **Interpreting Start time**: _____ **Interpreting finish time:** _____
Please inform STAIS if a follow-up booking has been agreed with our interpreter.

Your name: _____ **Signature:** _____

Part D: (STAIS use only)	**P / O No.**_____	**S / O No.**_____
Interpreting Time:_____	**£**_____	**£**_____
Travel time: _____	**£**_____	**£**_____
Travel Cost/s: _____	**£**_____	**£**_____
Vat pay / charge:	**£**_____	**£**_____
Total paid / charged	**£**_____	**£**_____