

# Appendix V: OIS Request Form (即場傳譯服務申請表)

## Hong Kong Christian Service CHEER On-site Interpretation Service (OIS) Request Form

Please complete this form together with your agency's chop and your signature to fax (No.:3106 0455) or email ([tis-cheer@hkcs.org](mailto:tis-cheer@hkcs.org)) at least **3 working days in advance**. We will reply you via email within 24 hours.

Information provided will be disclosed to our assigned interpreters and authorized staff of CHEER for the purpose to follow up your request.

<b>Case Reference number:</b> _____ <i>This number will be issued by CHEER.</i>	<b>Agency code(If Any):</b> _____ This code will be assigned by CHEER	
<b>Type of Organization:</b> <input type="checkbox"/> Education Bureau <input type="checkbox"/> Department of Health <input type="checkbox"/> Housing Department <input type="checkbox"/> Immigration Department <input type="checkbox"/> NGO <input type="checkbox"/> School <input type="checkbox"/> Social Welfare Department <input type="checkbox"/> Others: _____		
<b>Organization Information: (Compulsory for organizations without Agency Code)</b> <b>Name:</b> _____ <b>Unit/ Section:</b> _____ <b>Address:</b> _____ <b>Tel:</b> _____ <b>Fax:</b> _____		
<b>Enquirer Information: Name:</b> _____ <b>Post:</b> _____ <b>Email:</b> _____ <b>Tel (If different from above):</b> _____ <b>Fax (If different from above):</b> _____		
<b>Service User Information: Name:</b> _____ <b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male *Language Spoken: <input type="checkbox"/> Bahasa Indonesia <input type="checkbox"/> Hindi <input type="checkbox"/> Nepali <input type="checkbox"/> Punjabi <input type="checkbox"/> Tagalog <input type="checkbox"/> Thai <input type="checkbox"/> Urdu <input type="checkbox"/> Vietnamese		
<b>Date needing OIS: Please state your preferred dates &amp; time below.</b>		
<b>1<sup>st</sup></b> <b>Date:</b> ____(dd)__/__(mm)__/__(yy) <b>Time:</b> __ AM/PM to __ AM/PM	<b>2<sup>nd</sup></b> <b>Date:</b> ____(dd)__/__(mm)__/__(yy) <b>Time:</b> __ AM/PM to __ AM/PM	<b>3<sup>rd</sup></b> <b>Date:</b> ____(dd)__/__(mm)__/__(yy) <b>Time:</b> __ AM/PM to __ AM/PM
<b>Meeting Place:</b> _____ (room) _____ (floor) _____ (building) _____ (street/road) _____ (district) <input type="checkbox"/> New Territories <input type="checkbox"/> Kowloon <input type="checkbox"/> Hong Kong <b>Preference of interpreter:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Either		
<b>Contact Person (If different from above):</b> _____ <b>Contact Tel. on appointment date:</b> _____		
<b>Background information about the assignment</b>  (Please fax/ email relevant materials such as service description, application form together with this form if appropriate)		
<b>Payment methods, please</b> <input checked="" type="checkbox"/>	<b>Payment method:</b> <input type="checkbox"/> by cash/ cheque to CHEER's interpreter <input type="checkbox"/> by cheque sent to CHEER's office	
<b>*IMPORTANT NOTES: OIS is to convey messages from English to the requested spoken language and vice-versa during interpretation session. Sight interpretation from EM languages to English &amp; translation between English to EM languages will not be rendered.</b>		
Operation hour: <b>HK\$ 60/hr for Government Departments (Fees are waived for NGOs and all non-profit-making kindergartens, primary and secondary schools, colleges as listed in the EBD)</b> Non-operation hour: <b>HK\$100/hr for Government Departments</b> , non-operation hour rates apply to session starts or ends outside of our operation hours. (Fees are waived for NGOs and all non-profit-making kindergartens, primary and secondary schools, colleges as listed in the EBD) - Minimum time for an OIS is 30 minutes; time less than 30 minutes will be counted as 30 minutes. If the OIS finishes prior to the scheduled ending time, full payment will be charged. - Please contact us to confirm availability of the interpreter if the scheduled OIS is expected to overrun. We may not be able to give interpretation support during the extended period if no prior notice is made. Services provided during the extended period will be charged accordingly. - If more than 1 OIS will be conducted by the same interpreter on the same date, you are suggested to arrange a 10-minute break between each OIS. - To ensure the best quality of interpretation, each OIS should not last more than 1.5 hour.		
If you need an invoice, please tick here <input type="checkbox"/> <span style="float: right;">If you need an official receipt, please tick here <input type="checkbox"/></span>		
<b>Office Use Only</b>	<b>Confirmed OIS by:</b> _____ <b>on</b> _____ <b>(Date) at</b> _____ <b>(Time)</b> <b>Name of Interpreter booked:</b> _____ <b>Service charge:</b> _____	

Signed by : \_\_\_\_\_  
 Name of Officer : \_\_\_\_\_  
 Date : \_\_\_\_\_

Agency Chop: