



OREGON JUDICIAL DEPARTMENT
Court Language Access Services

CONSENT FOR PERSONAL INFORMATION RELEASE

I authorize that my name be placed on the Court Language Access Services non-certified languages roster. I understand that this roster may be made available to those searching for interpreters, including governmental agencies and attorneys, but that even with this consent, OJD will not share with the following:

- * language agencies*
- * general public / private citizens*
- * those seeking an interpreter for a language relating to an Oregon Circuit Court Ballot Measure 11 Case.*

OJD will not sell any information.

Signature: _____ **Date:** _____

Name: _____

Language(s) in which you are able to interpret: _____

E-Mail Address(es): _____

Home Phone: _____

Mobile Phone: _____

Additional Phone: _____

(check here if this is new information)

I prefer to be contacted (check all that apply):

by email by telephone

I do NOT authorize the OJD to place my name on the Court Language Access Services non-certified languages roster _____

Please return this form to: Oregon Judicial Department
Court Language Access
Services
541 NE 20th Ave #107
Portland, OR 97232

INTERNAL USE ONLY:

Date Received: _____

Date Entered: _____