

**ORDER OF APPOINTMENT
OF QUALIFIED INTERPRETER**

STATE OF SOUTH CAROLINA)	IN THE COURT OF _____
)	
COUNTY OF _____)	_____ JUDICIAL CIRCUIT
)	No. _____
)	
_____)	CASE NO. _____
Plaintiff)	
)	<input type="checkbox"/> Deaf/Sign Language
vs.)	<input type="checkbox"/> Non-English speaking
)	
_____)	_____
Defendant)	(Specify Language)

_____ is a deaf or non-English speaking person and/or a juror, or a party to a legal proceeding or a witness therein, or confined to an institution and is in need of the services of a qualified interpreter.

Therefore, pursuant to S.C. CODE ANN. Section 15-27-15, 15-27-155, or 17-1-50, it is ordered that _____, a qualified interpreter approved by the Court, is appointed.

For Team Interpreting:

I have determined this matter meets the following team interpreting requirement(s):

- The proceeding is scheduled to last more than three (3) hours.
- The proceeding involves both an LEP defendant and LEP witness or witnesses.
- This case involves multiple LEP parties with adverse interests.

_____, a qualified interpreter, has also been appointed.

(Order of Appointment is required for each Team Interpreter)

_____	X	_____
Date		Presiding Judge Signature
at _____, South Carolina		_____
(City)		Printed Name of Judge

Note: This form must be completed in its entirety. The Original form or Certified True Copy only are required for reimbursement. Forms not in compliance will be returned.