

DEPARTMENT OF HEALTH
 DIVISION OF POLICY AND PERFORMANCE
 1190 St. Francis Drive, Santa Fe, NM 87502
 Facsimile # 827-2942

ENGLISH – SPANISH TRANSLATION SERVICES REQUEST FORM

Requested by: _____ Date of Request: ____/____/____
 Division/ Bureau/ Office: _____
 Contact Person: _____ Phone#: _____
 e-mail: _____

Description of Translation Project: (attach document or web address if requesting webpage translation)

1. Document name/ Webpage(s):	2. Length in pages/words/ number of web pages:
3. Describe type of document /webpage and purpose (i.e. inform public about services; provide education about diabetes, etc.):	
4. Describe relevance of its translation (i.e. why do you think there is a need for this translation?):	5. Indicate if document/ webpage needs: <input type="checkbox"/> Translation into Spanish <input type="checkbox"/> Revision for correction and accuracy
6. Describe the intended audience for the translation (including literacy/ reading level of target audience):	7. Estimated number of people who will receive translation document:
8. Division priority level: <input type="checkbox"/> Very high <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	9. Other comments:

Division Director or Deputy Director: _____

(A Division Director or Deputy Director must sign all requests)

After receiving your request and document, several criteria will be applied to identify priority of each translation. The contact person will be notified about the decision and anticipated completion date within 10 working days.

For DPP use only:

Document in English: (complete all that apply)

- Not clear/ understandable Needs revision before translation Clear/ understandable
 Uses formal language and style Literacy level _____ Type of document _____

Translation Adequacy: (complete all that apply)

- Not needed/ useful for target audience Essential to target audience Need to adapt reading level
 Keep same style/ language (more literal translation) Reformat document, format type: _____
 Required time to translate _____

Translation Priority:

0= not needed 1=low 2= medium 3= high 4= very high

Indicate estimated deadline _____ Date document returned to Division _____