



INTERPRETER WORKSHEET

for Hennepin County Medical Center cases **ONLY!**

MAIL, FAX OR EMAIL WITHIN 24 HOURS!

Appointment Date ____/____/____

<p>Scheduled Hours:</p> <p>_____</p>

<p>Arrival Time:</p> <p>_____ am/pm</p>

<p>Departure Time:</p> <p>_____ am/pm</p>

Client/Patient Information	
<p>_____</p> <p>First Name</p>	<p>_____</p> <p>Last Name</p>
<p>_____</p> <p>Date of Birth</p>	<p>_____</p> <p>Gender</p>
<p>_____ / _____</p> <p>Medical Record #</p>	<p>_____</p> <p>Pt came/no show</p>

Assignment Information
<p>HENNEPIN COUNTY MEDICAL CENTER</p> <p>_____</p> <p>Clinic/Hospital/Home Care/Agency/Business</p>
<p>_____</p> <p>ISD</p>
<p>_____</p> <p>Department/Location</p>
<p>716 S 7TH ST MINNEAPOLIS, MN</p> <p>_____</p> <p>Street Address</p>
<p>PURPLE 1 SOCIAL SERVICES</p> <p>_____</p>
<p>ISD BACKLINE: 612-873-5751</p> <p>DRIVING DIRECTIONS: 612-873-9800</p>

<p>_____</p> <p>Interpreter Signature</p>	<p>_____</p> <p>Interpreter Full Name (PLEASE PRINT)</p>
<p>_____</p> <p>Date</p>	<p>_____</p> <p>Language</p>
<p>Comments: _____</p> <p>_____</p>	
<p>Provider/Staff Signature: _____ Date: _____</p>	

Garden & Associates, Inc. 4301 Highway 7, Suite 140, St Louis Park, MN 55416
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