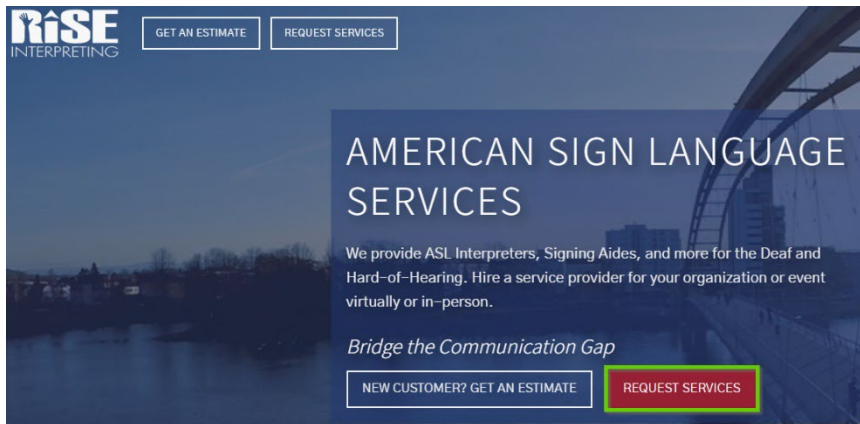


RiSE Interpreting (ASL Interpreter Requests)

RiSE Interpreting: Booking Procedures

To book with RiSE Interpreting, please follow the steps below.

1. Go to <https://riseinterpreting.com/>.
2. Select "Request Services".



3. Fill out the **Customer Information page** and select **Next Step**.

REQUEST SERVICES

Customer Information

Are you an Existing Customer? *

Yes

No

Will you be using a Purchase Order for this Request? *

Yes

No

Purchase Order: *

I have a purchase order number

I require an estimate to provide a purchase order number

**Processing time varies. We will proceed with scheduling your request in the meantime and will send your estimate prior to your request date.*

Requester Information

Customer Organization / Name *

Requestor Name *

Job Title / Role

First Name

Last Name

Person submitting this form

Your First Name

Your Last Name

Your Job Title / Role

Phone *

Email *

Consent *

I confirm that I am an authorized representative of this organization and that this organization is solely responsible for payment of the requested services.

NEXT STEP

4. Fill out the **Service Information** page (information is from Banner Student Profile) and select **Next Step**.

Service Information

Service Being Requested *

On-Site Interpreting

Language Being Requested / Specialty Service *

American Sign Language (ASL)

Job Information

Which of the following best describes your setting? *

Select

Situation Details *

List any additional details about the situation of this appointment to assist our interpreter in fully understanding the situation. e.g. Meeting Details / Reason for Appointment / Topics

Date & Time Information

Is this a Single Day Request, Multiple Days/Times, or Recurring/Long Term? *

- Single Day
- Multiple Days/Sessions
- Recurring/Long Term

PREVIOUS STEP

NEXT STEP

5. Fill out the **Service Provider(s) Information page** and select **Next Step**.

Service Provider(s) Information

of Service Providers Needed *

Depending on the nature, length, complexity, and context of the communication, assignments may require a team of 2 service providers.

1 ▼

Requested Service Provider(s) ?

Gender Preference *

No Preference ▼

Dress Code

Business Casual ▼

Consumer(s) Information

Consumer Name(s) * ?

Consumer Role(s) ?

Location Information

Service Location *

Street Address

City

State



ZIP Code

Location Name

List the School, Facility, or Business Name if applicable

Building / Floor / Room

Where the service provider should check-in

Parking



Type



Parking Instructions

Maps or permits can be uploaded at the end of this request

[PREVIOUS STEP](#)[NEXT STEP](#)

6. Fill out the Additional Information page and select Submit.

Additional Information

Point of Contact During Appointment *

Same As Requester

Add Additional Contact

Appointment Related Material

Agenda / Schedule / Map / PowerPoint / Permits

Drop files here or


SELECT FILES

Max. file size: 100 MB, Max. files: 5.

Additional Information / Special Instructions / Feedback

CAPTCHA

I'm not a robot


reCAPTCHA
Privacy - Terms

PREVIOUS

SUBMIT

If you have any questions while filling out this form, please contact info@riseinterpreting.com or Christina Leyvas at services@riseinterpreting.com. You can also call RISE Interpreting at (951) 565-4422.