

REQUEST FOR SERVICE FORM

Please complete all fields in the form and attach the document that requires translation. Should you have any questions or concerns, you can contact the Regional Translation office at hsntranslation@hsnsudbury.ca or call us at 705-523-7100 ext. 1563

Date:

Agency Name:

Contact Information (Name and Number):

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Number of words:

Date translation is required:

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Translation Instructions:

- Provide equivalents for titles specific to your agency (or indicate if they have never been translated before).
- Explain any abbreviations and acronyms.
- Ensure that only the final version of the document is submitted for translation.
- If retyping or reformatting translations, please send proof for final approval (see Translation Services Guidelines).

Translation Services Terms

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- Only MOHLTC-funded programs designated or identified to offer French Language Services are eligible for translation services.
- Translated documents should be equal in quality and availability to the English version.
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