

**Medical Respite Program**  
**CERTIFICATE OF INTERPRETATION**

I, \_\_\_\_\_, am competent to translate and interpret from  
Name of interpreter

\_\_\_\_\_ into English, and I certify that I have read this entire document to  
Name of language

\_\_\_\_\_, and that the recipient stated that they  
Name of medical respite recipient

understood the document, \_\_\_\_\_, before signing it.  
Name of document

\_\_\_\_\_  
Signature of interpreter

\_\_\_\_\_  
Typed/printed name of interpreter

\_\_\_\_\_  
Phone number of interpreter

\_\_\_\_\_  
Address of interpreter

\_\_\_\_\_  
Date

**CERTIFICATE OF TELEPHONIC INTERPRETATION**

I, \_\_\_\_\_, certify that, a telephonic interpreter,  
Name of medical respite program staff

\_\_\_\_\_, from \_\_\_\_\_  
Name of interpreter Name of company/service

who is competent to translate and interpret from \_\_\_\_\_ into English,  
Name of language

read the entire document, \_\_\_\_\_, to the  
Name of document

recipient in \_\_\_\_\_ and that the respondent stated that they understood the  
Name of language

document before signing it.

\_\_\_\_\_  
Signature of interpreter

\_\_\_\_\_  
Typed/printed name of interpreter

\_\_\_\_\_  
Phone number of interpreter

\_\_\_\_\_  
Address of interpreter

\_\_\_\_\_  
Date