

THE SUPERIOR COURT FOR THE COUNTY OF _____

STATE OF GEORGIA

_____)	
)	
Petitioner,)	
)	Civil Action
v.)	File No. _____
)	
_____)	
)	
Respondent.)	

PETITION FOR THE APPOINTMENT OF AN INTERPRETER AT NO COST

Petitioner, _____ in the above matter, pursuant to O.C.G.A. § 15-6-77(e)(4) files this Petition for the Appointment of an Interpreter at No Cost and shows the Court the following:

1.

The Petitioner filed a Petition for a Family Violence Protective Order pursuant to the Family Violence Act at O.C.G.A. §§ 19-13-1 et seq., on _____, _____.

2.

The hearing on the Family Violence Protective Order is scheduled for _____, 20__, at _____.

3.

The Petitioner needs the assistance of a(n) _____ interpreter/sign language interpreter at the hearing because: _____

WHEREFORE the Petitioner respectfully requests that this Court:

- (a) Provide a(n) _____ language interpreter/sign language interpreter for the Temporary Protective Order hearing; and
- (b) Order the reasonable cost of the interpreter to be paid from the victim assistance fund pursuant to O.C.G.A. §15-6-77(e)(4).

Respectfully submitted,

Petitioner

Address _____

(Do not give current address if confidential,
give alternative address)

Phone _____

THE SUPERIOR COURT FOR THE COUNTY OF _____

STATE OF GEORGIA

_____,)	
)	
Petitioner,)	
)	Civil Action
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)	
_____,)	
)	
Respondent.)	

VERIFICATION

The Petitioner, _____, personally appeared and who being duly sworn states that she/he is the Petitioner in the above case and that the facts set forth in the foregoing Petition for the Appointment of an Interpreter at No Cost are true and correct.

Petitioner

Sworn and subscribed before
me this ____ day of _____, _____.

NOTARY PUBLIC
My commission expires:

THE SUPERIOR COURT FOR THE COUNTY OF _____

STATE OF GEORGIA

_____)	
)	
Petitioner,)	
)	Civil Action
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)	
_____)	
)	
Respondent.)	

ORDER

Petitioner having filed a verified Petition requesting the appointment of a(n) _____ interpreter/sign language interpreter at no cost under O.C.G.A. §15-6-77(e)(4) the Court hereby orders that:

1. A(n) _____ interpreter/sign language interpreter be provided for the Petitioner at the hearing on the ____ day of _____, 20__, at ____ m. in Room _____ of the _____ County Courthouse; and
2. The reasonable costs of the interpreter be paid from the victim assistance fund, pursuant to O.C.G.A. §15-6-77(e)(4).

SO ORDERED this _____ day of _____, 20__.

 JUDGE, SUPERIOR COURT
 _____ COUNTY

 Print or stamp Judge's name