

## Request for Translation Service

### Instructions:

Complete one form for each item to be translated. One form may be used for several personal documents for a single individual.

### In house translations with no charge:

- Russian to English
- Spanish to English
- English to Russian
- French to English
- German to English
- Italian to English

### Additional Charges:

Other translations are done by contractors. Contractor completed translations are paid by your IC.

### Submitting a translation request:

Drop off your request at the NIH Library Translations Office  
Bldg. 10 / Room 1L21  
Phone: (301-496-2257). Fax (301-402-0254) or  
email your request(s)  
[NIHLibraryTranslationsStaff@mail.nih.gov](mailto:NIHLibraryTranslationsStaff@mail.nih.gov)

**Please include a signature of approving official and a Common Account Number (CAN) for any request to be translated by a contractor.**

**Notice:** Translation service is available to NIH staff for material relevant to employment/research.

Name:		Date of Request:
Institute or Center:	Building and Room:	Phone No.
<b>Signature of Approving Official</b> (who is authorized to approve expenditure and who certifies that this translation is essential to the research effort of NIH). Only for items to be translated by a contractor.		<b>Common Account Number</b> (Only for items to be translated by a contractor)
<b>Material to be Translated:</b>		
<b>DOCUMENT</b>	<b>PROTOCOL CONSENT</b>	<b>ARTICLE</b>
Type of document (letter, diploma, certificate, etc.):	Study number:	Author:
End user's name:	Amendment/Type:	Journal citation:
Translate from:	Translate from:	Translate from:
Translate into:	Translate into:	Translate into:
<b>TYPE OF TRANSLATION DESIRED</b>	<b>DEADLINE</b>	<b>CERTIFICATION / NOTARIZATION</b>
Check one: <input type="radio"/> Written  <input type="radio"/> Oral - available in French, German, Italian, Russian, and Spanish	Deadline (if any) for translation:	Certification needed (please mark with "x"):  Yes ( )      No ( )  Notarization needed (please mark with "x"):  Yes ( )      No ( )
<b>Other Instructions:</b>		
<b>FOR NIH LIBRARY USE ONLY</b>		
<b>ACTION</b>	<b>DATE</b>	<b>COST</b>
Translated by:	Date Translation Request Received by Translations Office (date logged in):	BPA Call Number HHSN:  Other:
Reviewed by:	Started	<b>APPROVED FOR PAYMENT:</b>
Returned to:		
Received:	Completed	<b>FINAL CHARGE:</b>
Language:		
Number of Words:		