

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF OKLAHOMA**

Application For Services to Persons with Communication Disabilities

**In re:**

**Case No:**

In accordance with the policy of the Judicial Conference of the United States, and the policy and guidelines of this Court, the undersigned requests a Court provided language interpreter(s) and/or other appropriate auxiliary aids and services as follows:

- Sign language interpreter
- Other communication aid, auxiliary aid or service (specify):

Who is the Judge hearing your matter?

What is the Hearing Date/Time/Location?

What is your role in the hearing? (Check one)

- Debtor       Defendant       Plaintiff       Witness       Other (specify):

I certify under penalty of perjury that I am deaf, hearing impaired, or have other communication disabilities that render me eligible for receipt of these services.

Applicant's Name (printed):

Applicant's Signature:

Date:

Applicant's Contact Information. Phone:

Email:

This *Application for Services* must be submitted to the Access Coordinator **at least fourteen (14) days** before the date of the hearing. Submission can be made by clicking the "Submit Now" button below. Questions: Contact the Access Coordinator at 405-609-5700