MANDARIN



This dual language appointment letter has been produced by Sussex Interpreting Services to help services inform patients with a language need of their appointment details. Please circle the relevant information and hand to/send to the patient. You will need to book an interpreterdirectly with SIS online at www.sussexinterpreting.org.uk

Dear 尊敬		appl										nformation to you 总适用于您				
		would like to make an appointment with you														
For 有关		GP Dentist 家庭医生 牙医 Legal Social Care 法律方面 社会护理			are	Midwif 助产士	ery g	Health 健康家 Immigr 移民	Visitin 访员	g Mental Health			Hospital appointment 医院预约			
At 在		此地 Your	ddress 业 home a 家庭住	addre	ss											
on 于		Monday 星期一		Tuesday 星期二		•		ednesday 期三			nursda 基期四	у	Friday 星期五			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
January 一月		February 二月		March 三月		April 四月		May 五月		June 六月		at 于				
July 七月		August 八月		Septembe 九月		er October 十月		November 十一月		December 十二月		10	C 11	1 2	1	
We will try to provide an interpreter 我们将尽力提供一位口译员								1,000	7 am 上午	•	<i>*</i>					

It is important that you keep this appointment. If you are unable to attend please 按时出席这个预约很重要。 如果您不能出席
telephone / 打电话到
and ask for / 找

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