***Instructions: Complete ALL fields and submit with payment to the address listed at the bottom.***

2017 Court Interpreter Orientation Application

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| **Personal Information** |
| [ ] Mr. [ ] Mrs.[ ] Ms. [ ]       | First Name: |       | Last Name: |       |
| Address: |       | Date of Birth: |       |
|  *Street City, State Zip Code* |  |
| Telephone: | (   )      | This number is a: | [ ]  cell phone [ ]  work phone [ ]  home phone |
|  | *(include area code)* |  |
| E-mail: |       | Agency (*if applicable*): |       |
| Non-English language(s) you interpret into: |       |  |       |  |       |
| *Language 1* | *Language 2* | *Language 3* |
| Judicial district(s) in which you are willing to work; for a map see: <http://www.wicourts.gov/courts/offices/map.htm>[ ]  All districts OR indicate specific districts: [ ]  1st [ ]  2nd [ ]  3rd [ ]  4th [ ]  5th [ ]  6th [ ]  7th [ ]  8th [ ]  9th [ ]  10th  |

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| **Orientation Locations & Dates (c*heck the location you wish to attend*)** |
| [ ]  **Milwaukee** | Sat. Mar. 25 & Sun. Mar. 26 | UW-Milwaukee | 2200 E Kenwood Blvd | Milwaukee 53201 |
| [ ]  **Wisconsin Rapids** | Sat. June 24 & Sun. June 25 | Mead Conference Center | 451 E. Grand Ave| Wis. Rapids 54494*\*For the Wisconsin Rapids training, a block of rooms has been reserved at the state rate at the Hotel Mead which is attached to the* *Mead Conference Center. Please contact the hotel directly to arrange lodging at 715.423.1500.* |
| [ ]  **Madison** | Sat. Sep. 23 & Sun. Sep. 24 | The Pyle Center | 702 Langdon St | Madison 53706 |
|  [ ]  Check this box if you have attended orientation in the past (*specify*):        *Year Location* |
| Lunches and breaks will be provided so indicate specific dietary needs: [ ]  None [ ]  Vegetarian [ ]  Vegan [ ]  Gluten-free [ ]  Other (*specify*.):        |
| [ ]  Check this box if you are applying for CEUs (*sign language interpreters only*). This training has been approved for 1.3 CEUs or 13 contact hours with the Registry of Interpreters for the Deaf (RID) |

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| **Interpreting & Translating Experience (*check all that apply*)** |
| Do you currently provide interpreting services? [ ]  Yes [ ]  No | If yes, indicate below the frequency and for whom: |
| Frequency: [ ]  Occasionally [ ]  Monthly [ ]  Weekly [ ]  Daily  | For whom**:** [ ]  Individual [ ]  Group |
| What kind of setting? (*check all that apply*) | [ ]  Circuit court [ ]  Municipal court [ ] Federal court[ ]  Law office [ ]  Admin. hearings[ ]  Police station [ ]  Jail/Prison [ ]  Hospital/Clinic [ ]  School [ ]  Business [ ]  Conference[ ]  Social services [ ]  Community [ ]  Other (*specify*):        |
| What type of interpretation? | [ ]  Simultaneous [ ]  Consecutive [ ]  Sight Translation [ ]  Conference |
| Do you currently provide translation services? [ ]  Yes [ ]  No  | If yes, indicate below the type of documents: |
| Type of documents: [ ]  Legal [ ]  Medical [ ]  Business [ ]  Technical [ ]  Other (*specify*):        |

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| **Educational Degree or Legal or Interpreting Training** |
| **Institution/Organization** | **Location** | **Start Date** | **End Date** | **Area of Study/Degree/Training** |
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| **Other memberships, credentials, licenses, or certifications** |
| **Credential/License/Certificate/Membership** | **Month & Year Obtained** | **Sponsor/Agency/Association** |
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| **General Information** |
| How did you hear about Wisconsin’s court interpreter certification program?[ ]  Internet [ ]  Colleague/Friend/Family [ ]  Career panel [ ]  Educational institution [ ]  Press release[ ]  Other (*specify*):        |
| Why are you interested in working as a court interpreter?       |
| Would you be available to work for the Wisconsin courts on a regular basis? [ ]  Yes [ ]  No |

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| **Accommodation Request *(if applicable)*** |
| **T** The Wisconsin Court System will provide reasonable accommodations to qualified individuals who request them. |
| [ ]  I am requesting a special accommodation because of a disability. |
| Please describe the accommodation you are requesting: |       |
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| **How to Submit the Application and Payment** |
| **Mail or hand-deliver the completed application with payment to:**Director of State Courts Office of Court OperationsAttn. Court Interpreter Program110 East Main Street, Suite #410Madison, WI 53703-3328 / Fax: 608.267.0911 | **Payment of $195 must be made with:***- a check or money order payable to “Wisconsin Supreme Court”; OR**- cash (do not mail cash!); OR**- credit card, you must call the Court Interpreter Program directly at 608.266.8635 to pay using this method* |