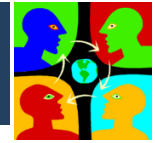


WISCONSIN COURT INTERPRETER PROGRAM

Application for the 2023 Online Orientation



110 E Main Street, Suite #410 | Madison WI 53703 | p: 608.266.8635 | e: alexandra.wirth@wicourts.gov | f: 608.267.0911

Instructions: Complete ALL fields below.

PART I. APPLICANT INFORMATION

| | | | |
|---|-----------------|-------------------|-------------------------|
| Last Name: | | First Name: | |
| Street Address: | | | Apartment/Unit #: |
| City: | State: | Zip: | |
| DOB: | E-mail Address: | | Agency (if applicable): |
| Work Phone: | Cell Phone: | Home/Other Phone: | |
| Non-English language(s) in which you interpret: | Language 1: | Language 2: | Language 3: |

Check the Wisconsin 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 ☐ 7th ☐ 8th ☐ 9th ☐ 10th

PART II. ONLINE ORIENTATION INFORMATION (Check the orientation you wish to attend)

☐ **Spring:** Saturday, March 4; Sunday, March 5; Saturday, March 11; Sunday, March 12 ONLINE

☐ **Fall:** Saturday, September 9; Sunday, September 10; Saturday, September 16; Sunday, September 17 ONLINE

Have you attended orientation in the past? ☐ No ☐ Yes, specify year and location:

Orientation materials are provided electronically via DropBox link which you will receive in advance once your application and payment have been processed.

☐ **Sign language interpreters ONLY.** Check this box if you are applying for CEUs. This training has been approved for 1.3 CEUs or 13 contact hours with the Registry of Interpreters for the Deaf (RID).

PART III. INTERPRETING AND TRANSLATION EXPERIENCE (Check all that apply)

Do you currently provide interpreting services? ☐ No ☐ Yes. If yes, for whom? ☐ Individual ☐ Group ☐ Family ☐ Other:

How frequently do you provide interpreting services? ☐ Never ☐ Occasionally ☐ Monthly ☐ Weekly ☐ Daily

What type of setting? ☐ Circuit court ☐ Municipal court ☐ Federal court ☐ Law office ☐ Administrative hearing ☐ Police station ☐ Jail or prison ☐ Hospital or clinic ☐ School ☐ Business ☐ Conference ☐ Social services ☐ Community ☐ Other (specify):

What type of interpretation? ☐ Simultaneous ☐ Consecutive ☐ Sight Translation ☐ Conference

Do you currently provide translation services? ☐ No ☐ Yes. If yes, indicate the type of documents: ☐ Legal ☐ Medical ☐ Business ☐ Technical ☐ Other (specify):

PART IV. EDUCATIONAL DEGREE OR LEGAL OR INTERPRETING TRAINING

| Institution/Organization | Location | Start Date | End Date | Area of Study/Degree/Training |
|--------------------------|----------|------------|----------|-------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

PART V. MEMBERSHIPS, CREDENTIALS, LICENSES, OR OTHER CERTIFICATION

| Membership/Credential/License/Other Certification | Month & Year Obtained | Sponsor/Agency/Association |
|---|-----------------------|----------------------------|
| | | |
| | | |
| | | |
| | | |

PART VI. GENERAL INFORMATION

How did you hear about Wisconsin's Court Interpreter 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

If you speak a refugee language* and would like to be considered for the Refugee Program Scholarship, explain why you think you are a good candidate to receive it (**MAINLY FOR WISCONSIN RESIDENTS**) The 2023 refugee languages are: **Arabic, Bari, Burmese, Chin, Dari, Dinka, French, Indonesian (Malay), Karen, Kinyarwanda, Kiswahili, Kirundi, Lingala, Nepali, Nuer, Pashto, Rohingya, Sango, Somali, Swahili, Tigrinya, Ukrainian, and Urdu.**

PART VII. ACCOMMODATION REQUEST (*if applicable*)

The Wisconsin Court System will provide reasonable accommodations to qualified individuals who request them.

☐ I am requesting an accommodation because of a disability. Please describe in detail the accommodation you are requesting below:

HOW TO SUBMIT THE APPLICATION AND PAYMENT: *This application form and fee of \$175 must be received by the corresponding deadline.*

| If you are paying by check or money order (MO): | If you are paying by credit card: |
|--|---|
| <ul style="list-style-type: none">▶ Make check or MO payable to Wisconsin Supreme Court▶ Mail completed application with check or MO to: Office of Court Operations 110 East Main Street, Suite #410 Madison, WI 53703-3328 Attn. Court Interpreter Program | <ul style="list-style-type: none">▶ Go to: https://www.wicourts.gov/services/payment/paymentcip.htm▶ Once payment is made, email the completed application to: alexandra.wirth@wicourts.gov▶ OR CLICK ON THE SUMIT BUTTON. |

Questions? Contact the Court Interpreter Program at 608.266.8635 or alexandra.wirth@wicourts.gov