



MAIL TO: STATE OF NEW YORK UNIFIED COURT SYSTEM
OFFICE OF COURT ADMINISTRATION - COORDINATOR OF COURT INTERPRETING SERVICES
8th Floor, 25 Beaver Street, New York, NY 10004
(646) 386-5670

APPLICATION FOR LANGUAGE SKILLS SCREENING
NYS REGISTRY OF PER DIEM COURT INTERPRETERS

Check the corresponding language(s) in which you wish to be screened:

- Albanian Arabic ASL BCS (Bosnian/Croatian/Serbian) Bengali Cantonese
French Greek Haitian Creole Hebrew Hindi Japanese Italian Korean
Mandarin Polish Portuguese Punjabi Russian Spanish Urdu Vietnamese
Other (Please specify):

Form with fields for Last Name, First Name, M. I., S.S or Tax ID #, Street Address, Apt #, City, State, Zip Code, Home Phone, and Cell Phone or Alternate Phone(s).

Are you a citizen of the United States? Yes No

If no, do you have a legal right to work in the United States? Yes No

Education :

Table with 4 columns: Education, Name of School and Location, Major/Minor, Degree Received/Expected. Includes rows for High School or Equivalency Diploma and College, University, Professional or Technical School.

Please indicate any specific certifications (professional, governmental or academic) you have obtained in the fields of linguistics, interpreting or translation?

Are you currently a member or maintain an affiliation with any professional organization(s) in the fields of interpreting or translation? Yes No

If yes, please identify the organization(s):

Interpreting/Translating Experience (attach additional sheets, if necessary):

Name of Organization/Employer	Address	Employed		Title & Duties
		From Month/Year	To Month/Year	

Are you currently an employee of the NYS Unified Court System? Yes No

How did you hear about this opportunity:

- NYS courts website
- Career fair at a college (which one): _____
- From an employee of the NYS court system
- Freelance interpreter
- Courthouse
- Public Service Announcement
- Print Ad (newspaper, magazine)
- Other (Please describe) _____

Except for minor traffic offenses and adjudications as youthful offender, wayward minor or juvenile delinquent,

- i) Have you ever been convicted of an offense against the law? Yes _____ No _____
- ii) Have you ever forfeited bail or other collateral? Yes _____ No _____
- iii) Do you now have any criminal charges pending against you? Yes _____ No _____

Have you ever been dismissed from any employment for reasons other than lack of work or funds? Yes _____ No _____

Have you ever received a discharge from the Armed Forces which was other than honorable? Yes _____ No _____

Are you currently in violation of a court order in any state for child or spousal support? Yes _____ No _____

If your answer is 'yes' to any of the above questions, please provide details on a separate sheet.

SPECIAL ARRANGEMENTS for the Language Skills Screening Exams:

Check below if you desire special arrangements because you are a

- Sabbath observer and for religious reasons cannot be tested on Saturdays.
- Person in need of other special arrangements in order to take this examination.

PLEASE COMPLETE THIS AFFIRMATION

I affirm that the statements made on this application (including any attached papers) are true. [False statements made in this application are punishable under Penal Law (§210.45) and may result in your disqualification.]

x _____
Signature of Applicant

_____ Date