



**Aging & Disability Services Division
Interpreter/CART Registry
3656 Research Way, Suite 32
Carson City, NV 89706**

Form A 3 – Community Interpreter Application

**Phone: 775-687-4452
Fax: 775-687-3292
Email: bahammond@adsd.nv.gov**

Section A Application Procedures/Checklist:

- Current Photo (Passport size)
- Photocopy of current picture identification with date of birth (e.g. Driver's License)
- Completed Application (Requires Notary)
- Signed, completed Code of Professional Conduct form (Requires Notary)
- Photocopy of current certifications
- Mentor form (Only at the Apprentice Level)

Section B Registration Category:

- Initial Application
- Registration Renewal
- Registration Update
- Registration Reinstatement

Each level of certification requires graduation from High School or completion of the GED:

- I am a high school graduate (Attach documentation) Year graduated: _____

Name and location of High School: _____

- I have completed and passed the GED (Attach documentation)

Year GED passed and name and address of issuing Institution: _____

- Neither apply, I have attached an explanation page.

I am registering for the following category and hold the following certifications:

Apprentice Level:

- NAD 2
- ACCI 2
- CDI in process of becoming certified
- Graduated an accredited Interpreter Training Program: Where/When: _____
- EIPA 3.5-3.9 Grade level (s) Assessed: _____ Modality Assessed: _____
 - I am/am not an Associate member of RID and participate in their ACET Program (Provide RID member number)
 - I do/do not have a mentor (mentor form attached)

I understand that at this level I shall not engage in the practice of interpreting in a medical or legal setting. (Initial) _____

I also understand I must be teamed with or accompanied by a certified interpreter at the skilled level or above when interpreting in the community (Initial) _____

Skilled Level:

- RID CI
- RID CT
- NIC
- NAD 3
- ACCI 3
- EIPA 4.0-4.7 Modality Assessed: _____
 - In order to satisfy the EIPA requirement, the applicant must also provide proof of RID Certification as a “Certified Educational Interpreter”

Advanced:

- RID CI AND CT Combined
- RID CSC
- RID - CDI
- NIC -Advanced
- NAD 4
- ACCI 4
- EIPA 4.8-5.0 Modality Assessed: _____
 - In order to satisfy the EIPA requirement, the applicant must also provide proof of RID Certification as a “Certified Educational Interpreter”

Master Level:

- NIC-Master
- RID – MSCS
- RID-Specialist Certificate: Legal
- RID-CDI with Specialist Certificate: Legal
- NAD 5
- ACCI 5

Section C Applicant information:

Full, Legal name of applicant (Include Alias or other names in parenthesis)		
Address where you can be reached		
City	State	Zip Code
Home Phone	Cell Phone	Work or other phone
Email		

Please indicate the contact information you want on the registry: (Name and certification information is mandatory):

Additional Questions

1. ____ Yes ____ No Have there been any substantiated allegations of a code of ethics violation(s) pertaining to interpreting/transliterating practice by any certifying body?

2. ____ Yes ____ No Has there been any adverse verdict as a result of any civil suit regarding your professional malpractice?

3. ____ Yes ____ No

Have you ever had an interpreter/transliterators credential denied, revoked, or suspended within the past ten years?

4. ____ Yes ____ No

Are there any pending actions related to a denial, revocation, or suspension of any interpreter/transliterators credential?

5. ____ Yes* ____ No

Have you been convicted of a crime under any laws within the past ten years?

*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

6. ____ Yes* ____ No

Are any criminal charges currently pending against you?

*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

7. ____ Yes ____ No

Is there any condition which would prevent you from providing interpreting service?

Section D Certification of Applicant:

Certification

I hereby agree and have knowledge of and comply with the standards set forth in Nevada Revised Statute 656A governing the provision of Interpreting and CART Services and understand the types of misconduct for which disciplinary action may be initiated against me pursuant to these regulations.

I hereby certify that the preceding information is correct to the best of my knowledge. I agree to abide by and follow the NAD-RID Code of Professional Conduct as set forth in section 40 (1)(e) of Nevada Revised Statute 656A.

Signature

Date

State of _____

County of _____

On the _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the county and state aforesaid, personally appeared _____, known to me to be the person named above and who executed the foregoing instrument, and he/she acknowledged to me that he/she executed the same freely and voluntarily.

BY: _____

Notary

Affix Notary Seal