



Interpreter & Translator Application Form

Send completed form to:
hr@globallanguageconnections.com
fax (888) 758-7680
3618 East Lake Street
Minneapolis, MN 55406
phone (612) 249-6100

Date: _____

MDH Roster #

Personal Information

Mr. or

Ms./Mrs.

First Name: _____ Last Name: _____

Address: _____

Home Phone: _____ Fax: _____

Cell Phone: _____ E-mail: _____

Work Phone: _____ Social Security Number: _____

List your language(s) and dialect(s), with your native language first:

Current Employer: _____

Position: _____

May we contact you at work? Yes No

City & Country of Birth: _____ Date of Birth: _____

Citizenship: _____

Do you have authorization to work in the USA? Yes No

Have you ever been convicted of a felony?
(A conviction may not automatically disqualify an applicant.) Yes No

Highest level of education completed: _____ Year of Graduation: _____

School: _____ Major: _____

Additional Education, if applicable: _____

Language Proficiency Self-Assessment

Please list your languages and select the one statement in each category that best describes your proficiency:

List language(s) here:

	ENGLISH				
Listening Comprehension					
1) I understand enough to meet basic daily needs, but often have to ask people to speak more slowly or repeat themselves.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) I can understand most conversations, but sometimes have to ask people to speak more slowly or repeat themselves.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) I can understand almost everything that is said, but still struggle a bit with very specialized subjects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) I have the comprehension of an educated native.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking Ability					
1) I can speak well enough to meet basic daily needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) I can discuss many subjects, but sometimes have trouble finding the right word to use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) I have a strong command of colloquial (informal) speech and have a wide vocabulary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) I am able to speak like an educated native.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Comprehension					
1) I can read only basic printed material, such as simple signs or messages.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) I am able to read and understand a lot of printed material, but still have to rely on a dictionary often.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) I am able to read nearly all material, as long as it is not too technical.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) I have the reading ability of an educated native.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Ability					
1) I am able to write simple messages only.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) I am able to write on many subjects as long as I have a dictionary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) I am able to write nearly everything I want to, as long as it is not too technical.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) I have the writing ability of an educated native.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

———— Interpreting/Translating Experience ————

Describe your interpreting and/or translating experience:

Do you have any formal training in interpreting and/or translating? Yes No

If yes, please describe:

Do you have any professional accreditation or certification for interpreting or translating? Yes No

If yes, please list:

Are you interested in attending training programs for interpretation and/or translation? Yes No

Please list your languages (other than English), and for each language, select every answer that applies:

List language(s) here (other than English):

Which types of interpreting do you feel qualified to do?				
Consecutive - <i>waiting for the speaker to finish, then beginning to interpret</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Simultaneous - <i>interpreting at the same time a speaker is talking; may involve equipment</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sight Translation - <i>translating a written document out loud</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Which subject areas do you feel qualified to interpret or translate in?				
Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal/Court	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical/Scientific	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please indicate): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you feel qualified to translate a written document from English into this language?				
Do you feel qualified to translate a written document from this language into English?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Availability

Interpretation Assignments

Indicate your preference for oral interpretation and/or written translation work:

- Both oral interpretation and written translation work Oral interpretation work only Written translation work only

Which days & hours are you available to interpret?

Do you have transportation? Yes No

Are you willing to travel? Yes No If yes, Within central MN? Statewide?

Do you have any rate expectation for interpretation work? \$_____ per hour

Translation Assignments

What computer programs do you feel comfortable using and have access to?

Do you have any rate expectation for written translation (per word or page)? \$_____ per _____

———— Volunteer Opportunities ————

Would you be willing to act in a volunteer capacity and provide emergency volunteer interpretation/translation services for the community? An emergency may occur on a 24/7 basis.

By phone? Yes No

In person? Yes No

If yes, in the MPLS area only? Yes No

Statewide? Yes No

References

List three references who can speak to your past interpretation/translation or other professional experience.

Reference 1:

Name: _____
Relationship to you: _____
Company/
Organization: _____
Address: _____
Phone: _____ E-Mail: _____

Reference 2:

Name: _____
Relationship to you: _____
Company/
Organization: _____
Address: _____
Phone: _____ E-Mail: _____

Reference 3:

Name: _____
Relationship to you: _____
Company/
Organization: _____
Address: _____
Phone: _____ E-Mail: _____