

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF NEW YORK

COURT INTERPRETER APPLICATION

Personal Information

Last Name:	First Name:	Middle:
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Home Phone:	At which phone number(s) or method are you most likely to be reached <u>during the day</u> ?
Work Phone:	
Cell Phone:	
<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> E-mail	
E-mail Address:	

Street Address:		
City:	State:	Zip Code:

Social Security Number / Tax ID Number:

Education (Please list all education above elementary level)

Name of School	City/Country	# of Years Attended	Degree

Specialized Training (Please include language courses completed)

Name of Course	Date(s) Attended	Certificate Awarded

Have you been certified as an interpreter by the Administrative Office of the U.S. Courts?

NO YES

Date of federal certification: _____

Linguistic Ability

Language	Read	Write	Speak	Interpret	Level of Proficiency

Experience - Please list the institutions in which you have interpreted

State or County Courts	Federal Courts	Other

Please specify what court locations you are able to serve:

Albany	Binghamton	Syracuse	Utica	Watertown	Plattsburgh

I am a U.S. Citizen -OR- I possess a valid Green Card, Social Security Card, and Driver's License

I have never been convicted of a crime

I hereby certify that the above information is accurate, and that I have read and am familiar with the policies set forth in the NYND Court Interpreter Manual and the Court Interpreter Contract Terms and Conditions.
<http://www.nynd.uscourts.gov/interpreter-services>

I agree to sign the Interpreter Contract and abide by the Court Interpreter Terms and Conditions. I understand and I agree that I will be required to maintain impartiality at all times. I agree to avoid unnecessary discussion with counsel, witnesses, interested parties, etc., either inside or outside of the courtroom. I understand and I agree that I will not discuss or disclose any information regarding the case, including any information deemed confidential by the court or by any concerned party. I will promptly notify the Court if I discover that I know or am related to the defendant for whom I am asked to interpret, or a co-defendant in the case, as this would constitute a conflict of interest. I further consent to a full background investigation based upon the submission of my fingerprints to the FBI. I understand that my addition to the NYND Interpreter Roster is at the discretion of the NYND Board of Judges.

Signed:	Date:
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Mail this completed form to:
Penny Price
U.S. District Court
Northern District of New York
100 South Clinton Street
Syracuse NY 13261-7367