



THE SUPREME COURT *of* OHIO

65 South Front Street Columbus, Ohio 43215-3431

APPLICATION FOR REGISTERED SIGN LANGUAGE INTERPRETERS

Instructions

This application is for American Sign Language interpreters who seek to be placed on the official roster of interpreters published online by the Supreme Court of Ohio. Pursuant to Rule 82.01 of the Rules of Superintendence for the Courts of Ohio and beginning January 1, 2021, the Supreme Court of Ohio will offer credentialing to sign language interpreters who do not possess a Specialist Certificate: Legal (SC:L).

These newly credentialed interpreters will be categorized as “Registered Sign Language Interpreters.” In order to receive this credential, the sign language interpreter must possess any of the following credentials:

- National Interpreter Certification (NIC);
- Certification of Interpretation and Certification of Transliteration (CI/CT);
- Comprehensive Skills Certificate (CSC);
- Master Comprehensive Skills Certificate (MCSC);
- Level V Certification (NAD V);
- Level IV Certification (NAD IV).

The candidate must be at least eighteen years old, be a citizen or legal resident of the United States or have the legal right to remain and work in the United States and must not have a conviction of any crime involving moral turpitude.

Additionally, candidate must be in good standing with the entity from which the interpreter received certification, must receive a score of eighty percent or better in National Center for State Court’s written examination and complete 24 hours of court interpreter training.



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APPLICATION FORM FOR REGISTERED SIGN LANGUAGE INTERPRETERS

Please complete the entire application. Do not leave any fields blank. INCOMPLETE APPLICATIONS WILL BE RETURNED.

Applicant Information:

Mr./Mrs./Ms./Dr.: _____
(circle preferred) Last Name First Name Middle Name

Mailing Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Email: _____ Driver's License #: _____ State: _____

Sign Language Certifications: _____

EMPLOYMENT (List no more than two or attach your resume)

Employer	Title/Duties	Start Date	End Date

BACKGROUND INFORMATION:

Do you have any other sign language interpreter certification from the ones listed in this application?	Yes <input type="checkbox"/>
If yes, State: _____, Year: _____	No <input type="checkbox"/>

Have you ever been credentialed or licensed as an interpreter in another state? If yes, where? _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of a felony? If yes, explain: _____ _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of a misdemeanor other than a traffic violation? If yes, explain: _____ _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a legal right to live and work in the United States?	Yes <input type="checkbox"/> No <input type="checkbox"/>

ROSTER INFORMATION: The following info will be displayed on the roster

1) Which of the following is your preferred method of contact? (Check all that apply)

Home Phone Work Phone Cell Phone Email

2) Which of the following is your preferred travel area? (Check all that apply)

Statewide Southwest Southeast Northeast Northwest Central

3) What is your availability? This could include something like 8AM-6PM, any weekday, anytime, or any other time frame you wish to add.

Certification

I certify that the answers I provided to the questions in this application are true and complete to the best of my knowledge. I understand that if this application is not completed in its entirety, it may not be processed and will be returned to me at the address on the form. I also understand that a background check will be required prior to receiving credentialing from the Supreme Court of Ohio.

Applicant Signature	Date