

The Supreme Court of Ohio

65 South Front Street Columbus, Ohio 43215-3431

CIE Form #11

APPLICATION FOR ONLINE APPROVAL OF CONTINUING INTERPRETER EDUCATION CREDITS

This form is for interpreters seeking to report continuing education credits which will be earned online. Please complete the information below. Incomplete forms will be returned and credit will not be accepted.

APPLICANT INFORMATION (type or print): Last Name Mailing Address: State County Zip City Home Phone: (_____) _____ Cell Phone: (_____) E-Mail Address: ONLINE COURSE DETAILS: Name of Sponsor: Name of Instructor: Title of the Course: Dates of Attendance: _____ Number of Weeks: _____ Number of Hours of Instruction: ____ Certification I certify that the training information I provided is true and complete to the best of my knowledge. I

I certify that the training information I provided is 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 it will be returned to me at the address on the form. I also understand that the training sessions listed will be confirmed prior to receiving approval of all continuing education credits for a two year period (24 hours).

Signature	Date	