

PROFESSIONAL LANGUAGE CERTIFICATION
EXAMINATION APPLICATION

PLEASE NOTE:
THIS IS NOT AN APPLICATION
FOR EMPLOYMENT.

LAST NAME	FIRST NAME	SOCIAL SECURITY NUMBER	DAY TELEPHONE NUMBER (INCLUDE AREA CODE) ()
HOME MAILING ADDRESS (NOT EMPLOYER OR AGENCY)		APARTMENT/SUITE NUMBER	HOME TELEPHONE NUMBER (INCLUDE AREA CODE) ()
CITY	STATE	ZIP CODE	COUNTY
			E-MAIL ADDRESS

TESTING FOR CERTIFICATED LANGUAGES

TEST OF INTEREST * (ONE TEST AT A TIME; CHECK ALL APPROPRIATE BOXES, FOR EXAMPLE, MEDICAL INTERPRETER TEST, WRITTEN TEST)

When registering for Medical or Social Services interpreter tests, you must take the written test first. You must pass the written test before you can register for the oral test.

- | | | |
|--|--|--|
| <input type="checkbox"/> Medical Interpreter Test: | <input type="checkbox"/> Social Services Interpreter Test: | <input type="checkbox"/> Translator Test: |
| <input type="checkbox"/> Written test - \$30.00 per attempt | <input type="checkbox"/> Written test - \$30.00 per attempt | <input type="checkbox"/> English to target language - \$50.00 per attempt |
| <input type="checkbox"/> Oral test - \$45.00 per attempt | <input type="checkbox"/> Oral test - \$45.00 per attempt | |
| | <input type="checkbox"/> Simultaneous test (retake only) - | |

LANGUAGE OF INTEREST (CHECK ONE)

- | | | | |
|------------------------------------|----------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Korean | <input type="checkbox"/> Chinese-Cantonese | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Laotian | <input type="checkbox"/> Spanish | <input type="checkbox"/> Chinese-Mandarin | <input type="checkbox"/> Vietnamese |

SCREENING FOR NON-CERTIFICATED LANGUAGES (LANGUAGES NOT LISTED ABOVE)

When registering for Social Services interpreter screening or Medical Interpreters screening tests, you must take the written test first. You must pass the written test before you can register for the oral test.

- | | |
|--|--|
| <input type="checkbox"/> Medical Interpreter Screening Test | <input type="checkbox"/> Social Services Interpreter Screening Test |
| <input type="checkbox"/> Written test - \$30.00 per attempt | <input type="checkbox"/> Written test - \$30.00 per attempt |
| <input type="checkbox"/> Oral test - \$45.00 per attempt per language | <input type="checkbox"/> Oral test - \$45.00 per attempt per language |

PLEASE SPECIFY THE LANGUAGE YOU ARE REQUESTING TO BE TESTED IN.

MARK YOUR PREFERRED TEST SITE Yakima Olympia

SPECIAL ACCOMMODATION, IF NEEDED (PLEASE SPECIFY)

*** Note:** You can only take one portion (written or oral) of one test (e.g., Medical Interpreter Test) at a time. The test fee should be paid by check or money order in the exact amount shown above. Score report letters will not be sent to candidates whose checks have been returned for insufficient funds. Make sure you can attend the test session as indicated on your confirmation letter, because the test fee is non-refundable.

NO CASH will be accepted!
Payment should be made payable to:
DSHS/LTC Testing

Please mail this completed form with your payment to:
 DSHS/LANGUAGE TESTING AND CERTIFICATION
 PO BOX 9501
 OLYMPIA WA 98507-9501

You will receive your confirmation letter and a pretest package within approximately one month from the date this Examination Application and your payment are received.

DO NOT DETACH. PLEASE COMPLETE THE FOLLOWING

LTC

Applicant name (please print): _____

Amount Paid

\$ _____