

# Superior and District Court of the State of Washington for the County of Snohomish

## YOU WILL NEED THE INTERNET TO ACCESS THIS SCHEDULING SOFTWARE

Date \_\_\_\_\_

Name: \_\_\_\_\_  
(last) (first) (middle)

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: Day: \_\_\_\_\_

Evening: \_\_\_\_\_

Page/Voice Mail: \_\_\_\_\_

Cellular: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Languages in Order of Proficiency: \_\_\_\_\_  
\_\_\_\_\_

Dominant Language: \_\_\_\_\_

Washington Court Certified  Yes  No      Washington Court Registered  Yes  No  
Federal/Oregon Certified  Yes  No

Do you accept Snohomish County Courts' payment guidelines as outlined on pages 2-5 of the Snohomish County Courts Interpreter Policy and Procedures document?  Yes  No

If you answered no to the above question please indicate your hourly rate and travel reimbursement requested.

Check the interpreting modes in which you are proficient

Simultaneous	Consecutive	Sight	From: (language)	To: (language)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	From: _____	To: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	From: _____	To: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	From: _____	To: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	From: _____	To: _____

Number of trials you have interpreted for:

	Civil	Criminal
Bench	_____	_____
Jury	_____	_____

List interpreting experience with dates, including length of experience in years or months, name of court, and type of trials or hearings. *Please list only types of cases, not specific names of litigants.* (For more space, please attach additional sheet.)

Courts	_____ - Municipal	_____
	_____ - District	_____
	_____ - Superior	_____
	_____ - Federal	_____
	_____ - Juvenile	_____
	_____ - Administrative Hearings	_____
	_____ - Military Hearings	_____
	_____ - Other	_____

Other Interpreting Experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Written Translation Experience (include dates):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Education:	<u>NAME</u>	<u>CITY/COUNTY</u>	<u>DEGREE &amp; YEAR</u>
High School	_____	_____	_____
University	_____	_____	_____
Post Graduate	_____	_____	_____
Other	_____	_____	_____

List all qualification certificates, language certification, and interpreting awards:

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List training seminars, schools, study, etc.:

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List professional affiliations:

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List names and telephone numbers of **three (3) references who have worked with you directly and who are familiar with your *interpretation work***, at least two of whom are attorneys or judges.

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I have read the Washington State Code of Conduct for Court Interpreters and I agree to abide by it.

Signed: \_\_\_\_\_

Please indicate your availability:

Days of the week \_\_\_\_\_  
Times of day \_\_\_\_\_  
Evenings \_\_\_\_\_  
Weekends \_\_\_\_\_

I am willing to work at the Cascade Division in Arlington. YES  NO

I am willing to work at the Evergreen Division in Monroe. YES  NO

I am willing to work at the Everett Division in Everett. YES  NO

I am willing to work at the South Division in Lynnwood YES  NO

I am willing to work at Snohomish County Corrections in  
Everett. YES  NO

I am willing to work at the DJJC location in Everett . YES  NO

I am willing to work in Superior Court in Everett. YES  NO

I am willing to work at the Public Defender's Office  
in Everett. YES  NO

Please attach resume and curriculum vitae or other information you think will be of assistance to:

Interpreter Coordinator  
Snohomish County District Court  
3000 Rockefeller Avenue, M/S 508  
Everett, WA 98201

