## **United States District Court For the District of South Carolina**

## 901 Richland Street Columbia South Carolina 29201

## Questionnaire

## **Court Interpreter Qualification Form**

Na	me:	
Ad	dres	ss:
Te	leph	none Number:
En	nail	Address:
Na	tive	Language:
Sk	ill le	evel at which you wish to be qualified (See attached documentation for criteria)
		( ) Language-Skilled ( ) Certified/Professionally qualified
In En	the o	categories below, provide information which will demonstrate that you are fluent in h and the above language, are able to render a simultaneous and accurate translation in a pom (trial) environment and should be qualified at the skill level checked above.
Qu	esti	ons should be addressed to Wanda Williams, 803-253-3471. Complete questionnaires be faxed (803-253-3909) or emailed to <a href="www.wanda-Williams@scd.uscourts.gov">Wanda Williams@scd.uscourts.gov</a> .
1.		owledge and use (other than courtroom) of English and the above language.  How long have you been proficient in your 2 <sup>nd</sup> language?
	b.	What experience do you have using your 2 <sup>nd</sup> language?

2.	Education/Professional Certifications: (Attach copies of diplomas or professional certifications)
3.	Experience translating in courtroom (trial) environment:
	a. References - translating in courtroom environment
	Court Employee Name: Court: Telephone number: Email Address:
	Court Employee Name: Court: Telephone number: Email Address:
	Court Employee Name: Court: Telephone number: Email Address:
	Signature Date