OREGON JUDICIAL DEPARTMENT
Court Language Access Services

INITIAL APPLICATION FOR THE OREGON REGISTERED COURT INTERPRETER CREDENTIAL

	Please Return this form by mail to: Oregon Judicial Department Court Language Access Services 541 NE 20th Ave #107 Portland, OR 97232
Name:	
Address:	
Home Phone Number	
Cell Phone Number	
Email Address:	
Applying for the Registered Credential in the following language:	

Required Enclosures:

- ☐ Nonrefundable $50.00 application fee
  - ☐ Check enclosed made payable to "The Office of the State Court Administrator"
  - ☐ Credit Card (we accept: Visa, MasterCard or Discover). Call (503) 731-3283
- ☐ Court Language Access Services Observation/Request for Interpreting Service Hours (10 hours)
- ☐ 1 standard-sized passport photograph (2" x 2")

Testing: be sure that you have completed the required exams before submitting your application. You do not need to submit your scores. The exams are

- ☐ Ethics Exam
- ☐ English Proficiency Test (Versant)
- ☐ Foreign Language Proficiency Test

I, the undersigned, provide information in this application which is true and accurate

_____ _____

Signature Date

Revised 8.24.2015

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COURT INTERPRETER OBSERVATION LOG

INTERPRETER NAME:

Date:	Time In	Time Out	Total Time/Staff Initials	Hearing Information (hearing type, charges, judge, room, etc.):	Interpreter Involved? Language?

TOTAL OBSERVATION TIME:

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REQUEST FOR INTERPRETING SERVICE HOURS

The OJD State Court Administrator's Policies for application of the Registered Court Interpreter's credential require 10 hours of interpreting services or observation in courts of record in Oregon or Consortium member states, federal courts of record, or where the interpreter is sworn in and the record can be presented into evidence. OJD court interpreting hours meet the requirements for application. To request a summary of OJD hours for application, please complete the top portion of this form prior to submitting the entire renewal application. The three year period requested should correspond to the time you began working towards the credential. You will receive a summary report of OJD interpreting hours via email.

Interpreter Name:
Vendor Number:
Years Requested:
Email Address for Notification:

Please return this form by either mail, email, or fax to:
Court Language Access Services
1163 State Street
Salem, OR 97301
Court.interpreter.program@ojd.state.or.us, Fax (503) 961-7636

CLAS PORTION

Number of hours:

Please return the entire form via Email to:

court.interpreter.program@ojd.state.or.us

(Please also cc the interpreter using the email address listed above).

Revised 8.24.2015