



On-Call Interpreter and Translator Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Street Address _____ Apartment/Unit _____

City _____ State _____ ZIP Code _____

Phone: _____ Email: _____

Date Available: _____ Social Security Number: _____ Date of Birth (MM/DD/YY): _____

Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S.? YES NO

Have you worked for IMAA previously? Yes No If yes, when? _____

Languages Spoken Other than English

Native Language: _____

Fluent Speaker Reading Writing Oral Interpretation Written Translation

Other Language: _____

Fluent Speaker Reading Writing Oral Interpretation Written Translation

Other Language: _____

Fluent Speaker Reading Writing Oral Interpretation Written Translation

Experience

Please explain what kind of interpreting and translating you have done in the past (for example, interpreting in medical, school, or legal settings).

Please explain any training that you have had related to interpretation and translation (for example, MN Court interpreter training, University of Minnesota training, on-the-job training, etc.)

Availability and Travel

Place an "X" in the boxes that correspond with the days and times that you are available to interpret.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					
Anytime					

In rare cases, we need to provide interpretation after 5pm on the weekdays or on the weekends. May we put you on the on-call list if a need comes up?

- Yes No

I have my own transportation.

- Yes No

I can travel to the following area(s):

- Metro area (Minneapolis, St. Paul, and surrounding suburbs)
- Southeast (Rochester, Red Wing, Winona, Austin, Albert Lea)
- Southwest (Marshall, Pipestone, Worthington)
- Central (St. Cloud, Brainerd)
- West Central (Moorhead, Pelican Rapids, Detroit Lakes)

Disclaimer and Signature

As a condition of securing language service contracts, IMAA must conduct a criminal background check on all on-call interpreters. I agree and give permission to IMAA to review my personal history as recorded at the State Bureau of Criminal Apprehension and any other sources available.

Signature: _____ Date: _____

Please email this application with your resume to languageservices@imaa.net. Or, you may mail or drop off this application and your resume to:

Intercultural Mutual Assistance Association
Attn: Language Services
2500 Valleyhigh Dr. NW
Rochester, MN, 55901