



# San Antonio College

DEPT OF AMERICAN SIGN LANGUAGE & INTERPRETER TRAINING  
DEAF AND HARD OF HEARING SERVICES  
1300 SAN PEDRO AVE., NTC 005, SAN ANTONIO, TX 78212  
210-785-6084 / 210-733-2074 fax  
<http://www.accd.edu/sac/asl/html/deaf.htm>

Application:

## Advanced Interpreting Mentorship (AIM) Program

Personal Information

Last Name		First Name		Middle Name	
Email Address			Date of Birth		
Street Address					
City		State		Zip Code	
Primary Phone		Secondary Phone		Text Address	

Optional

Gender	Race/Ethnicity	<input type="checkbox"/> Deaf / <input type="checkbox"/> Hard of Hearing / <input type="checkbox"/> Hearing
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Certification Information

Are you currently certified by any state or national organization?  Yes  No

If yes, indicate which level and organization: \_\_\_\_\_

Have you attempted the BEI English Proficiency Test?  YES  NO

Have you passed the BEI English Proficiency Test?  YES  NO

Have you attempted the BEI Performance Test?  YES  NO

Education

Interpreter Training Program		Program Chairperson			
Street Address					
City		State		Zip Code	
Program Phone Number		Program Web Address			

Did you complete the course requirements from this program?  YES  NO

Did you complete an Interpreting Internship with this program?  YES  NO

How many hours of Interpreting Internship hours were completed? \_\_\_\_\_ hours

Internship Information

List all the certified interpreters which you actively worked with during your internship experience. Do not include observations. Indicate the frequency worked with the certified interpreter. Please attach a list of other certified interpreters not listed in space provided.

Certified Interpreter

Frequency

_____	<input type="checkbox"/> Often <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely
_____	<input type="checkbox"/> Often <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely
_____	<input type="checkbox"/> Often <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely

Internship Experience

Please check all the settings which you have worked as part of your interpreting internship experience.

<p>Educational (as applies)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Elementary</li> <li><input type="checkbox"/> Middle School</li> <li><input type="checkbox"/> High School</li> <li><input type="checkbox"/> Post Secondary</li> <li><input type="checkbox"/> Vocational</li> <li><input type="checkbox"/> Workshops / Conferences</li> </ul>	<p>Community (as applies)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Legal</li> <li><input type="checkbox"/> Medical</li> <li><input type="checkbox"/> Mental Health</li> <li><input type="checkbox"/> Performing Arts</li> <li><input type="checkbox"/> Religious</li> <li><input type="checkbox"/> Rehabilitation / Employment</li> </ul>	<p>Other experience Please specify:</p>
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Please check all the modes in which you have experienced as part of your interpreting internship experience.

<ul style="list-style-type: none"> <li><input type="checkbox"/> English to ASL</li> <li><input type="checkbox"/> ASL to English</li> <li><input type="checkbox"/> English to Transliterated English</li> <li><input type="checkbox"/> Transliterated English to English</li> <li><input type="checkbox"/> English to Oral Transliteration</li> <li><input type="checkbox"/> Oral Transliteration</li> </ul>	<p><input type="checkbox"/> Trilingual Services Please indicate the languages:</p>	<p>Other experience Please specify:</p>
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Employment Experience

Please check all the settings which you have worked as part of your interpreting internship experience.

<p>Educational (as applies)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Elementary</li> <li><input type="checkbox"/> Middle School</li> <li><input type="checkbox"/> High School</li> <li><input type="checkbox"/> Post Secondary</li> <li><input type="checkbox"/> Vocational</li> <li><input type="checkbox"/> Workshops / Conferences</li> </ul>	<p>Community (as applies)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Legal</li> <li><input type="checkbox"/> Medical</li> <li><input type="checkbox"/> Mental Health</li> <li><input type="checkbox"/> Performing Arts</li> <li><input type="checkbox"/> Religious</li> <li><input type="checkbox"/> Rehabilitation / Employment</li> </ul>	<p>Other experience Please specify:</p>
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Please check all the modes in which you have experienced as part of your interpreting internship experience.

<ul style="list-style-type: none"> <li><input type="checkbox"/> English to ASL</li> <li><input type="checkbox"/> ASL to English</li> <li><input type="checkbox"/> English to Transliterated English</li> <li><input type="checkbox"/> Transliterated English to English</li> <li><input type="checkbox"/> English to Oral Transliteration</li> <li><input type="checkbox"/> Oral Transliteration</li> </ul>	<p><input type="checkbox"/> Trilingual Services Please indicate the languages:</p>	<p>Other experience Please specify:</p>
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Personal Statement

In the space provided, address why you are a good candidate for the AIM Program.

References

To assist the screening process, please provide us with the name and telephone numbers of three people who can accurately speak of your signing and/or interpreting skills and background. Include references both Deaf and hearing.

Reference Name

Phone Number

_____	_____
_____	_____
_____	_____

Submitting Application

This application should be submitted by mail or in person to:

**San Antonio College, Deaf and Hard of Hearing Services  
ATTN: Advanced Interpreter Mentorship (AIM) Program  
1300 San Pedro Ave., NTC 005  
San Antonio, TX 78212**

The following should be submitted with the application:

- Prepared resume, vitae and/or portfolio.
- Sealed official transcripts of school with interpreting training program.
- Two letters of recommendation. Can be from your references. No family members.
- Copy of BEI letter of English Proficiency Test.
- Copy of any state and/or national interpreter certification(s).

Agreement

In consideration for the Advanced Interpreter Mentorship (AIM) Program, I certify that all answers to the questions in my application, resume and other attached documents are true. I further understand that any false statements and/or omissions in this application and other attached documents will be sufficient grounds for the rejection of the application or termination of employment.

I understand that San Antonio College, Deaf and Hard of Hearing Services will determine and select best qualified candidate(s) for the AIM program for a minimum duration of one academic semester. I understand that that the employment can not exceed 19 hours a week and compensation is not guaranteed. If compensation is granted, the rate would be at the status of an uncertified interpreter.

I understand that to be considered for the Aim Program, completion of an interpreter training program course study and internship is required.

I understand that San Antonio College does not discriminate on the basis of race, religion, color, national origin, sex, age, or disability with respect to access, employment, programs, or services.

I authorize San Antonio College to make any and all necessary and appropriate investigations to verify the information contained herein including credentials and work experience. I authorize my references named to furnish whatever information is requested about my qualifications and employment/internship record and release any person and companies from any liability incurring from the furnishing of such information.

BY SIGNING BELOW, I certify that I have read and agree with these statements.

Signature

_____	_____
Applicant's Signature	Date