



Application for Admission

Instructions:

Please mail or fax completed forms to:

InterpreterEd.com
1313 N. Grand Ave. #280
Walnut, CA 91789
Fax (800) 730-0380

Refund policy:

Please visit: interpretered.com/admission-form/refund-policy/

Privacy Policy:

InterpreterEd.com respects the right to privacy of its students and is committed to safeguarding the personal information of each student. Please visit our website, www.InterpreterEd.com, to view the full policy.

Thank you for considering **InterpreterEd.com**. Our instruction department provides various courses related to language access and healthcare. We hope that you will find that this course helps you achieve your educational and professional goals.

Please type or write clearly on the application form. The details you give in this form will be used for the administration of your application, and potentially as the basis of your participant record. If the form is incorrectly completed your application may be delayed and may not be processed.

Your surname/family name is used to identify and match all materials sent with your application and for responding to inquiries. Please use only your full, legal name as given in your passport and identity documents.

Once your application is submitted, you will receive an e-mail confirming receipt and additional important enrollment related information. This message will be sent to the e-mail address you provide when registering.

Courses require successful completion of a bilingual assessment before the student can be enrolled. Submission of this form does not guarantee acceptance to these courses.



I apply for the following seminar/course (choose only one option per form):

Course: _____

Dates: _____

Name

- I am a new student
- I am a returning student

First Name	M.I.	Last name	D.O.B. (mm/dd/yy)	
Gender <input type="checkbox"/> M <input type="checkbox"/> F	Email address - Personal		Email address - Professional	
Day Phone #		Evening Phone #		
Mailing Address		City	State	ZIP
Name of current employer		Title		

Emergency Contact

Name:	Address:	Relationship	Phone #:
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Languages

Primary language:	Writing Level	Reading Level	Speaking Level	Comprehension Level
Other Languages	1 = very limited ability - 5 = native fluency			

Education

Institution and location	Degree	Years	Field of study