



Division for Rehabilitation Services
Office for Deaf and Hard of Hearing Services
Request for Approval of Proposed Training
for General and Court Interpreters Continuing
Education Units (CEUs)

[Statutory Authority: Texas Human Resources Code, Section 81.006(a)(b)]
 The Office for Deaf and Hard of Hearing Services must receive this form 30 calendar days before the date of the training (for example, course, workshop, or seminar). The presenter or sponsor must complete the form for each proposed training event each time the training is presented.

Training Information

Title of training:	Date(s) of training:
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	Day one	Day two	Day three	Other day(s) if applicable
Starting time				
Ending time				
Lunch break	hr. min.	hr. min.	hr. min.	hr. min.
Working lunch?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Name of training site:	City:
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Organization or sponsor:

Submitted by:

Email address:	Telephone number:	<input type="checkbox"/> TTY <input type="checkbox"/> Voice <input type="checkbox"/> Fax
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Mailing address:	City:	State:	ZIP code:
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Name of presenter(s):

Method of instruction: Workshop Lecture or seminar Self-study or video study

Category of instruction: Professional studies General studies

Requirements for Court Interpreter Trainer

If you are requesting approval of training for **court** interpreters, complete this section.

This application will be reviewed to ensure that it meets the court interpreter certification training criteria found at Court Interpreter and Court Interpreter Mentor Training Course Options.

Select type of provider: <input type="checkbox"/> Employee training <input type="checkbox"/> School <input type="checkbox"/> College or university <input type="checkbox"/> Other (specify): <input type="checkbox"/> Professional association	Types of interpreting skills targeted: <input type="checkbox"/> ASL <input type="checkbox"/> Oral interpreting <input type="checkbox"/> SEE <input type="checkbox"/> Sign to Voice or Voice to Sign <input type="checkbox"/> Intermediary <input type="checkbox"/> Other (specify):
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Level of certification targeted:

Required Attachments

For **general** and **court** interpreter training, attach a copy of the:

- course outline,
- course narrative,
- course handouts,
- presenter's résumé showing education and interpreting experience,
- course description and study schedule (for self-study or video study), and
- conference agenda (if applicable).

For **court** interpreter training, also attach a copy of the presenter's court interpreter certificate, lawyer's license, or paralegal's license.

Person(s) (Representatives) Authorized to Sign Certificates of Attendance

Signature:

Printed name:

For DARS-DRS-DHHS Use Only

Approval granted: Court CEU number: Credit units:

Approval pending: reason:

Approval denied: reason:

Database entry Contacted by: Letter sent

Approved by:

Date:

Return this form and attachments to
Office for Deaf and Hard of Hearing Services
Attention: CEU Program
4900 North Lamar, Suite 2169, Austin, Texas 78751
PO Box 12904, Austin, Texas 78711
(512) 407-3250 Voice or (512) 407-3251 TTY
Fax: (512) 407-3299
Email: ceus.dhhs@dars.state.tx.us
www.dars.state.tx.us/dhhs