



POST-SECONDARY INTERPRETING SCREEN APPLICATION

Personal Information

Surname, Given Name	Date
Phone	E-mail Address
Mailing Address (Street, City, Postal Code)	

Credentials (attached)

Graduation from a qualified interpreting program
(attach transcript unofficial transcript and copy of your graduation certificate)

Member of CASLI/Provincial Association (attach proof of membership)

Successful completion of CASLI's Written Test of Knowledge (Preferred)

Successful completion of Screen Written Test

Screen Version

I will be taking version ___ of the screen.

Version A

Version B

Consent to Release Test Results

I, _____, being a candidate of the Post-Secondary Screen, hereby give permission to have my test results forwarded to ACE-BC. I also consent to the possibility of my test being used as a training aid for raters.

Confidentiality Agreement

I agree upon completion of the Post-Secondary Screen to keep confidential the contents of the Screen.

Signature	Date
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Payment & Submission Instructions

E-mail office@ace-bc.ca or mail to the address above (cheque only), the completed application with supporting documentation.
Please make cheque payable to BCIT with memo: ACE-BC.

Total assessment fee \$184.00

Payment Method: Cheque <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> AMEX <input type="checkbox"/> *2% service charge for all cards		
Card #	CVR #	Expiry Date
Cardholder Name		
Cardholder Signature		