**DOCUMENTATION OF ACCOMMODATION FOR THE COURT INTERPRETER ORAL CERTIFICATION EXAM**

This document must be completed by an appropriate professional (doctor, psychologist, psychiatrist, or education professional) to certify that the applicant’s disabling condition requires an exam accommodation.

If there is existing and current documentation of having the same or similar accommodation provided to the applicant in another test situation, it may be submitted instead of having this portion of the form completed.

**Exam Description**

The court interpreter oral certification exam is designed to determine whether test-takers possess the minimum levels of language knowledge and fluency in both languages, and the ability to successfully render meaning from one language into another in each of the three modes of interpreting that are required of court interpreters. The three modes of interpreting are:

* Sight translation of documents;
* Consecutive interpreting; and
* Simultaneous interpreting.

Each portion of the exam is administered as follows:

**Sight Translation**: This part of the test simulates an interpreter reading (1) an English document aloud into the non-English language, and (2) a non-English document into English. Each of the two documents is approximately 225 words in length. After instructions are given, the candidate is allowed six minutes to complete the English document, and six minutes to complete the non-English document. The test taker's oral renditions are digitally recorded.

**Consecutive Interpreting:** This is the appropriate form of interpreting for non-English speaking witnesses, and other question-answer situations. During this portion of the test, the test taker listens to an audio recording at normal conversational pace, and interprets English language questions (segments) into the foreign language, and foreign language answers (segments) into English. The test taker may ask to have two of the segments repeated. Candidates are encouraged to take notes to assist their memory. The consecutive script is 850-950 words in length. The test taker is given approximately twenty minutes to complete this portion of the exam, but the precise time depends on the actual number of words in the test version. The test taker's oral renditions are digitally recorded.

**Simultaneous Interpreting:** Simultaneous interpreting occurs when a person interprets what someone is saying, at the same time they are saying it. This is the appropriate mode of interpreting for many situations interpreters encounter in the courtroom, for example, interpreting for defendants during hearings and trials. This part of the exam consists of an audio recording of a simulated attorney’s opening or closing statement to a judge or jury. It is approximately 800 to 850 words in length, is recorded at an approximate speed of 120 words per minute, and is approximately seven minutes long. The test taker listens to the prerecorded English passage through over-the-ear headphones and, while listening, interprets aloud into the non-English language. The test taker's oral renditions are digitally recorded.

**Standard Testing Conditions**: The exam is given in its entirety, and typically takes less than one hour to complete. The exam is typically administered in a meeting room, and the test taker will take the exam in the presence of only one proctor.

For questions about exam content and conditions, please contact Carmel Capati, Court Interpreter Program Manager at [carmel.capati@wicourts.gov](mailto:carmel.capati@wicourts.gov) or 608.266.8635.

**PROFESSIONAL’S DECLARATION**

I have known        since       .

*(applicant's name)*  *(date)*

As a        I have diagnosed or evaluated the

*(patient or other professional relationship)*

applicant myself and I am not relying upon facts related to me by the applicant.

My diagnosis is       .

*(describe medical or other condition)*

The applicant’s functional limitations due to the disability that lead to the need for an

accommodation are:

I have reviewed the exam description on pages 1-2. It is my professional opinion that because of the applicant’s disability, he/she should be accommodated by providing the following:

Large print type (font size       )

An alternate testing area (describe       )

Extra time (how much and which test section(s)?       )

A reader for the sight translation portion

Other accommodation (describe

Additional Comments:

SIGNATURE OF THE PROFESSIONAL:

TITLE OF THE PROFESSIONAL:

PRINTED NAME OF THE PROFESSIONAL:

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE NUMBER:

Please return the original of this completed form, at your earliest convenience to:

**Director of State Courts Office of Court Operations**

**110 East Main Street, Suite #410**

**Madison, WI 53703-3328**

**Attn. Court Interpreter Program**