

# Iowa Interpreters and Translators Association

## Active Member Accreditation Form

Name of Active Member: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby apply for Active Membership through the following:

(choose any/all that **currently** apply):

**Translator** currently certified by the American Translators Association (“ATA certified”)

**Interpreter** currently certified by:

the Administrative Office of the United States Courts (“Federally certified”);  
the National Association of Judiciary Interpreters and Translators (“NAJIT certified”);  
the Registry of Interpreters for the Deaf (“RID”);  
any member state of the Consortium for State Court Interpreters Certification  
 (“Consortium certified”);  
the National Board of Certification for Medical Interpreters  
 (“CERTIFIED MEDICAL INTERPRETER”);  
the Certification Commission for Healthcare Interpreters  
 (“CERTIFIED HEALTHCARE INTERPRETER™”)

**Translator** with **proof** of degree or certificate in translation **and two letters of reference** from a client or supervisor who can attest to your work

**Interpreter** with **proof** of degree or certificate in interpretation **and two letters of reference** from a client or supervisor who can attest to your work

Evidence of **full-time\* work** as a **translator or interpreter** for the **last three years, or part-time\*\* work** as a **translator or interpreter** for the **last six years:**

**Three letters of reference** from clients or supervisors who can attest to the above

\*For purposes of qualification as an Active member under this criteria, full-time work as a translator or interpreter is defined as work in which a minimum average of 30 hours per week is spent providing actual translation or interpretation services.

\*\*For purposes of qualification as an Active member under this criteria, part-time work as a translator or interpreter is defined as work in which a minimum average of at least 10 hours per week is spent providing actual translation or interpretation services.

**NOTE: You MUST submit copies of the required supporting documentation with this form.**

**Questions? Contact the Active Membership Review Committee at [info@iitanet.org](mailto:info@iitanet.org)**

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