

ORAL PROFICIENCY EXAM REGISTRATION FORM



ARKANSAS 2015

The following information must be **printed or typed** in its entirety and returned to:
Administrative Office of the Courts, 625 Marshall Street, Justice Building, Little Rock, AR 72201,
*Attention: Court Interpreter Services **no later than the registration deadline.***

REGISTRATION FEE - \$250.00

Make checks payable to: **AOC Court Interpreter Fund**
 (Fee must accompany your registration form or your registration will not be accepted.)

EXAM LANGUAGE: _____ PREVIOUSLY TESTED: (Y/N) _____
(If yes, list year)

Candidate's Name: _____
Last Name First Name Middle Initial

Candidate's Social Security Number: _____ - _____ - _____

Candidate's Mailing Address: _____

Candidate's Email Address: _____

Daytime Telephone Number: _____

Select the one (1) date you would like to register for the Oral Exam from the list below. If you have already taken the Oral Proficiency Examination for Certification, choose a date that is at least 12 months later than your previous testing date as you can only take the exam once in a 12 month period. Please be sure to note the registration deadline as each date has a different deadline.

ORAL PROFICIENCY EXAMINATION FOR CERTIFICATION DATE	LOCATION	REGISTRATION DEADLINE
February 7, 2015	Little Rock	December 22, 2014
October 3, 2015	Little Rock	August 24, 2015

The candidate will receive a confirmation notice *after* the registration deadline has passed. The notice will include the exact time of the candidate's examination, directions to the testing location and other pertinent information. The candidate is required to present an acceptable form of photo identification when signing in the day of the exam. Failure to appear at the scheduled time will result in a forfeiture of the full registration fee.

★ **HAVE YOU COMPLETED ALL INFORMATION AND INCLUDED A CHECK FOR \$250.00 MADE PAYABLE TO AOC COURT INTERPRETER FUND?**