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**Translator On-Dossier Certification**

**Application Form**

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| **I. PERSONAL INFORMATION** |
| Last Name | First Name | Initial |
| Address |
| City | Province | Postal Code |
| ( ) - Phone number (home) | ( ) - Phone number (work) | ( ) - Cellphone |
| Email  |
| **II. LANGUAGE COMBINATION** |
| Source Language | TO | Target Language | Applying under criteria:  | 1, 2, 3 or 4 |
| **III. PROFESSIONAL STATUS** |
| Salaried 🞏 Freelance\* 🞏 Independent\*\* 🞏 Retired 🞏\*Freelance: Accepts occasional translation assignments \*\*Independent: Self-employed translator |
| **IV. EDUCATION**Please list your four most recent and relevant post-secondary studies, and attach copies of your diplomas and transcripts. |
| Institution 1 (university, college, other post-secondary) | City, country | Program of Studies |
| Degree/diploma obtained |  - Year: from to |
| Institution 2 (university, college, other post-secondary) | City, country | Program of Studies |
| Degree/diploma obtained |  - Year: from to |
| Institution 3 (university, college, other post-secondary) | City, country | Program of Studies |
| Degree/diploma obtained |  - Year: from to |
| Institution 4 (university, college, other post-secondary) | City, country | Program of Studies |
| Degree/diploma obtained |  - Year: from to |
| **V. EXPERIENCE**Please detail your experience **only** in the language combination to which you are applying for certification. If you need more space, please enclose additional pages. |
| Years of experience in the language combination: |  |
| 1. Company/Employer (if self-employed, write your company’s name or specify “self-employed”) |
| Job Title | Employment period From (mm/yyyy) to (mm/yyyy) |
| Supervisor (if self-employed, write “self-employed”) | Supervisor’s Job Title (if self-employed, write “N/A”) |
| Supervisor’s contact information (if self-employed, write “N/A”) ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |

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| 2. Company/Employer (if self-employed, write your company’s name or specify “self-employed”) |
| Job Title | Employment period From (mm/yyyy) to (mm/yyyy) |
| Supervisor (if self-employed, write “self-employed”) | Supervisor’s Job Title (if self-employed, write “N/A”) |
| Supervisor’s contact information (if self-employed, write “N/A”) ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| 3. Company/Employer (if self-employed, write your company’s name or specify “self-employed”) |
| Job Title | Employment period From (mm/yyyy) to (mm/yyyy) |
| Supervisor (if self-employed, write “self-employed”) | Supervisor’s Job Title (if self-employed, write “N/A”) |
| Supervisor’s contact information (if self-employed, write “N/A”) ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| **VI. SPONSORS**You will need three sponsors to submit your application. Please refer to the Application Instructions and Appendix D – Definitions for details about your sponsors. |
| Sponsor 1 (Same language combination) (Full name) | Sponsor 1’s Job Title |
| Sponsor 1’s contact information: ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| Sponsor 2 (Full name) | Sponsor 2’s Job Title |
| Sponsor 2’s contact information: ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| Sponsor 3 (Full name) | Sponsor 3’s Job Title |
| Sponsor 3’s contact information: ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| **VII. REFERENCES**You will need two references to submit your application. Please refer to the Application Instructions and Appendix D – Definitions for details about your references. |
| Reference 1 (Full name) | Reference 1’s Job Title |
| Reference 1’s contact information: ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |
| Reference 2 (Full name) | Reference 2’s Job Title |
| Reference 2’s contact information: ( ) - ( ) - ( ) - Email address Phone number Alternative phone number Cellphone |