

COMMONWEALTH OF MASSACHUSETTS  
OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



**APPLICATION QUESTIONNAIRE**

(Please type)

**Name: Mr. Ms.** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone: Cell:** \_\_\_\_\_ **Home:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Language (s) in which you feel qualified to interpret:**

Interested applicants must meet the following minimum criteria for this application to be processed:

- The applicant has completed a Bachelor's degree in the USA, or an equivalent college degree from another country. (A copy of credit transcripts or diploma will be required at the time of the interview.) Some exceptions may apply for applicants in languages of lesser diffusion in Massachusetts, or on an as-needed basis for emergency situations.
- The applicant possesses advanced level of proficiency in both English and the other language, as well as cultural competency skills. This means proficiency that reflects college-level instruction at the oral and written levels so as to pass a written screening exam that includes grammar, vocabulary, reading comprehension and translation exercises. Exceptions may apply for some languages of lesser diffusion in Massachusetts, or on an as-needed basis for emergency situations.
- Prior interpreting and translating training and/or professional experience are not required, but are desirable and may receive preference in recruitment.
- Applicants must possess the paperwork required to work in the United States.

OCIS will interview and test potentially-qualified candidates when the need to recruit in their languages or in their geographical area arises.

OCIS will keep applications of candidates who meet minimum requirements on file for future reference.

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



For additional information, go to:

<https://www.mass.gov/orgs/office-of-court-interpreter-services>

**■ GENERAL EDUCATIONAL BACKGROUND**

1. Academic credentials [If you are invited to an interview, you will be asked to bring along official copies of transcripts or diploma(s).]

BA or Equivalent/Post-Graduate Degree(s) completed: \_\_\_\_\_

Concentration/Areas of Specialization: \_\_\_\_\_

Year(s) of graduation: \_\_\_\_\_

Name(s) of school(s): \_\_\_\_\_

Language(s) in which courses were taught: \_\_\_\_\_

2. Have you taken legal courses? YES      NO

If yes, where? \_\_\_\_\_ Date(s) \_\_\_\_\_ Degree, if any? \_\_\_\_\_

Please, briefly describe the contents of the course(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you taken courses on linguistics, translation, interpretation? YES      NO

If yes, where?: \_\_\_\_\_ Date(s) \_\_\_\_\_ Degree, if any? \_\_\_\_\_

Please, briefly describe the contents of the course(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**■ LANGUAGE PROFICIENCY BACKGROUND**

**4. ENGLISH**

Please indicate which among the categories below best describe your English proficiency level:

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



Written	Advanced, with only minor mistakes	Professional translator level (superior command of grammar, spelling, style)
Oral	Advanced with only minor mistakes in grammar and pronunciation	Superior level (superior command of structures, ample lexicon, native-level pronunciation)

Did you complete an English as a Second Language program? When? Where?

Did you take the TOEFL exam? Date \_\_\_\_\_ Score \_\_\_\_\_

Did you take the GRE exam? Date \_\_\_\_\_ Score \_\_\_\_\_

Were you administered an Oral Proficiency Interview (OPI)?

Date: \_\_\_\_\_ Results: \_\_\_\_\_

Any other English Oral or Written Proficiency test?

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Score: \_\_\_\_\_

**5. OTHER LANGUAGE(S)**

List the language(s) other than English you are most qualified to interpret in. Indicate below for each language whether you learned and or use this language or these languages in school or at home.

**Language 1:** \_\_\_\_\_

Home only

Elementary School level

High School level

College. How many years?

Adult Education Program (Please, specify.)

Have you lived in a country where **Language 1** was an official language or was spoken by most of its residents?

If YES, where did you live? \_\_\_\_\_

For how long? \_\_\_\_\_

How long ago? \_\_\_\_\_

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



**Language 2:** \_\_\_\_\_

- Home only
  - Elementary School level
  - High School level
  - College. How many years?
  - Adult Education Program (Please specify)

Have you lived in a country where **Language 2** was an official language or was spoken by most of its residents?

If YES, where did you live? \_\_\_\_\_

For how long? \_\_\_\_\_

How long ago? \_\_\_\_\_

**■ INTERPRETATION BACKGROUND**

6. Have you ever received any formal training in (oral) interpretation?

YES      NO

If YES, please give name(s) of institution(s) and date(s), language(s) and describe the training received:

\_\_\_\_\_  
\_\_\_\_\_

7. Did you receive an academic/professional certificate or degree in interpretation?

YES      NO

If YES, please specify:

\_\_\_\_\_  
\_\_\_\_\_

8. Have you ever been hired to work as an interpreter? YES      NO

If YES, please indicate: name and address of institution(s) or organization(s), dates of service, language(s) and describe your interpreting duties:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



■ **TRANSLATION BACKGROUND**

9. Have you ever received any formal training in (written) translation?

YES      NO

If YES, please give name(s) of institution(s) and date(s), language(s) and describe the training received:

---

---

10. Did you receive an academic/professional certificate or degree in translation? YES      NO

If YES, please specify: \_\_\_\_\_

11. Have you ever been hired as a translator? YES      NO

If YES, briefly describe the type of documents you have translated and their purpose:

---

---

---

---

■ **CODE OF CONDUCT FOR INTERPRETERS**

12. Read the interpreter's Code of ***Professional Conduct for Court Interpreters*** (Go to [www.mass.gov/courts](http://www.mass.gov/courts). Click on "Site Index", Click on "I", click on "Code of Conduct" and answer the following question):

You are the interpreter for a Non-English speaking witness appearing at a trial. When responding to a question posed by the prosecutor, the witness gives an answer that you know is wrong based on prior interviews with that same witness. What do you do, according to the Code?

---

---

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



---

---

---

---

---

13. Please write a short biographical sketch highlighting the experiences/qualities you feel qualify you to work as a court interpreter.  
(You can type/write it here or attach a separate page.)

---

---

---

---

---

---

---

---

14. Please provide two professional references who can be contacted regarding your interpretation and translation experience or other professional experience:

1. Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-Mail if available: \_\_\_\_\_

In what capacity can this person evaluate your professional/personal skills?

---

---

---

2. Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-Mail if available: \_\_\_\_\_

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



---

In what capacity can this person evaluate your professional/personal skills?

---

---

---

---

**Applicant's Signature**

---

**Date Completed**

**■ SUBMITTING YOUR COMPLETED QUESTIONNAIRE TO OCIS\***

Please mail questionnaires to:

Office of Court Interpreter Services  
Two Center Plaza, 9th Floor Boston,  
MA 02108  
Attention Application Questionnaire

You can also e-mail an electronic version to: [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us) (On the Subject line, you must write: OCIS Application Questionnaire)

*OCIS will e-mail an acknowledgment of receipt, indicating the status of your application.*

\*Please understand that OCIS may not interview potentially qualified candidates unless a need to recruit in their languages arises.

\* OCIS will keep applications of candidates who meet minimum requirements on file for future reference.

**COMMONWEALTH OF MASSACHUSETTS**  
**OFFICE OF COURT MANAGEMENT, OFFICE OF COURT INTERPRETER SERVICES**



Two Center Plaza, Boston, Massachusetts 02108  
(T) 617-878-0269; (F) 617-367-9293; [languageaccess@jud.state.ma.us](mailto:languageaccess@jud.state.ma.us)



**FOR OCIS USE ONLY**

DATE RECEIVED: \_\_\_\_\_

STATUS: \_\_\_\_\_

Applicant does not meet minimum requirements.

Applicant meets minimum requirements, but language not needed at the moment. Questionnaire will be filed for future reference.

Applicant meets minimum requirements, and language is needed now.  
Interview scheduled for: \_\_\_\_\_

RESPONSE E- MAILED ON: \_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**COMMONWEALTH OF MASSACHUSETTS  
THE TRIAL COURT  
CONSENT TO CRIMINAL RECORD CHECK  
  
AUTHORIZATION TO RELEASE RECORDS**

**Section I: To be completed by applicant and will be conducted by the Human Resources Department on final candidate:**

I understand that in order to be employed in the Massachusetts Trial Court, I must submit to a criminal record check. Therefore, I provide my consent to a criminal record check and acknowledge that the information provided below is true and accurate.

**Full Name:** \_\_\_\_\_  
                            First Name                              Middle Name                              Last Name

**Date of birth:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ **Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Maiden Name or other name(s) by which you have been known:** \_\_\_\_\_  
\_\_\_\_\_

**Mother's Maiden Name:** \_\_\_\_\_

**Father's Full Name:** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Section II: To be completed by the Office of Court Management**

\_\_\_\_\_ Record check DOES comply with *Personnel Policies and Procedures Manual*.

\_\_\_\_\_ Record check DOES NOT comply with *Personnel Policies and Procedures Manual*.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**