



NAD-RID NATIONAL INTERPRETER CERTIFICATION INTERVIEW AND PERFORMANCE TEST APPLICATION



Name: _____ **SSN:** _____
(Last) (First) (M.I.) (Social Security Number)

Address: _____ **Memb.#:** _____
(Street) (State) (Apt. #) (RID Membership Number)

(City) (Zip)

Phone: _____ **V TTY Both** _____ **V TTY Both** _____ **E-Mail:** _____
(Home) (Work)

Cell Phone: _____

NOTE: All Information is mandatory except pager, cell phone, and RID member number for non-members.

Test	Item	Member	Non-Member	Payment
NIC Interview and Performance Test (INTRODUCTORY PRICE)	Test Fee (includes \$40 non-refundable application fee)	\$325.00	\$425.00	
	Retake Fee (includes \$40 non-refundable application fee)	\$275.00	\$375.00	
			TOTAL amount enclosed (U.S.)	

The NIC Test will be administered nationwide starting in the summer of 2005. Certified members in good standing of RID or current Candidates For Certification (those with time left on their five-year written test cycle--with either the Generalist Written Test or the new NIC Knowledge Test) are eligible to take this test. The test will consist of five interview questions and five performance scenarios. Both interview and performance portions of the test must be taken as a unit in one administration. There will be levels of certification granted and feedback as a part of the rating process. For more detailed information, please refer to the NIC Candidate Bulletin for this test at www.rid.org.

If you have a disability or need that requires a special accommodation, please describe below. Official verification of the need for the accommodation MUST accompany this application.

- In order to receive the RID member rate, you MUST already be a member in good standing and include your member number.
- Do you maintain other NAD or RID certification? YES NO
If yes, please list: _____
- If you book testing slots with multiple supersites and do not cancel the unused appointments, following existing guidelines, you will be charged a full testing fee.
- Testing will only be scheduled through supersites. Please send your application to RID at least four weeks before the date you would like to test. We will process your application in about two weeks and send you a receipt letter. Once you have the receipt letter, you may contact a supersite directly to schedule a testing slot. Do not contact the supersite until you have received your receipt letter.
- RID is not responsible for any incorrectly filled applications.

IMPORTANT: Please read the following statement and description of the NAD-RID NIC tests. All applicants must sign this acknowledgement that they have read and will abide by the following agreement.

I understand and agree that all materials developed and used in the test that I am applying to take are the copyrighted property of the National Association of the Deaf (NAD) and the Registry of Interpreters for the Deaf, Inc. (RID), which are not-for-profit organizations; that the test and test results are likewise the property of NAD and RID and are not to be shared, duplicated or disseminated in any fashion; that such are not diagnostic in nature and can be used for no purpose other than as intended by NAD and RID; and that the scores and method of grading cannot be reviewed by anyone (myself included) except by those authorized by NAD and RID to evaluate and/or grade. Test appeals will not be considered on the basis of rater decision/judgment (96.03).

I have read and understand the conditions and requirements placed on me by NAD and RID in taking the test applied for and do agree to abide by all of these and the rules for taking the test as set out by NAD and RID. I hold harmless NAD and RID, its officers, agents, and employees from any and all liability, except intentional wrongdoing, in the offering, taking, grading, and reporting of these tests. I understand and agree with the above statements.

Signed: _____ Date: _____
(REQUIRED) By signing this, I certify that I am 18 or older.

RID shall not discriminate in matters of certification testing or membership on the basis of age, color, creed, disability, ethnicity, hearing status, national origin, race, religion, gender, or sexual orientation.

Payment Information

IMPORTANT: RID must receive payment in full before you will be eligible to take the test. You may fax or mail your application.

Money Order or Check # _____

VISA Master Card

Card # _____

Expiration Date _____

Name on Card _____

Make check payable to RID, Inc.
Send application, fees, and any supporting documentation to:
 NAD-RID National Interpreter Certification
 C/O RID, Inc.
 333 Commerce Street
 Alexandria, VA 22314
 (703) 838-0454 Fax