

SCHOOL

APPLICATION LEGAL STUDIES - INTERPRETER PROGRAMS

SELECT PROGRAM(S):									
Court Interpreter I: Language of Justice Court Interpreter Program						SPRING 2024		FALL 2024	
Court Interpreter II: Practice and Skills Training Program						SPRING 2024		FALL 2024	
Community, Healthcare, and Legal Interpreting						SPRING 2024		FALL 2024	
FAMILY NAME/LAST NAME					SOCIA	L SECURITY NUMBER	(required, if yo	ou have one)	
GIVEN NAME/FIRST NAME			MID	MIDDLE NAME					
PERMANENT ADDRESS									
CITY, STATE, ZIP CODE					HOME TELEPHONE				
LOCAL OR BUSINESS ADDRESS					CELL TELEPHONE				
CITY, STATE, ZIP CODE					BUSINESS TELEPHONE				
E-MAIL PERSONAL		ALTERN	ATE EI	MAIL THAT YOU	J CHECK	FREQUENTLY			
DATE OF BIRTH: MONTH, DAY, YEAR	PLACE OF BIRTH: CITY, STATE, CO	ACE OF BIRTH: CITY, STATE, COUNTRY ARE			YOU A R	ESIDENT ALIEN?	YES	NO	
		IE VE			S, PROVIDE RESIDENT NUMBER				
ARE YOU A U.S. CITIZEN? YES NO	STATE OF LEGAL RESIDENCE	l l							
NATIVE LANGUAGE			OPI SCORE OR OPI EQUIVALENCY (please describe)						
OTHER LANGUAGES				(required for Community, Healthcare, and Legal Interpreting class only)					
OTTIER LANGUAGES									
GENDER AND ETHNICITY INFORMATION Answering the following questions is optional and will not affect consideration of your application. Delaware Law uses this information for statistical purposes only.									
(OPTIONAL) MALE FEMALE									
(OPTIONAL) ARE YOU A MEMBER OF A MINORITY GROUP? YES NO IF YES, PLEASE IDENTIFY THE GROUP:									
ACADEMIC INFORMATION Please list all schools attended for COLLEGIATE, GRADUATE, AND PROFESSIONAL EDUCATION									
				FROM:					
SCHOOL				TO: FROM:		MAJOR	G.P.A.	DEGREE	

MAJOR

TO:

G.P.A.

DEGREE

How did you hear about these programs?							
NOTE: ANY FALSE OR MISLEADING STATEMENT, INCOMPLETE OR INACCURATE INFORMATION IN THIS APPLICATION MAY CAUSE YOU TO BE DENIED							
ADMISSION, OR IF ADMITTED, TO BE DISMISSED FROM WIDENER UNIVERSITY DELAWARE LAW SCHOOL.							
In accordance with the Family Educational Rights and Privacy Act of 1974, your personal information will be used only by office personnel and university							
officials and will not be released to third parties without your written consent. Widener University Delaware Law School does not discriminate on the basis							
of color, race, national origin, ancestry, sex, disability, religion, age, sexual orientation, or veteran status in its educational programs, employment							
programs, or activities							
If this application is accepted, I agree to abide by the rules and regulations of Widener University Delaware Law School.							
I CERTIFY THAT THE INFORMATION I HAVE PROVIDED	SIGNATURE	DATE					
ON THIS APPLICATION AND ANY ATTACHED MATERIALS							
IS TRUE AND COMPLETE.							

EMAIL THIS APPLICATION TO: delawarelawGICLS@widener.edu

Include resume and one letter of recommendation.

For Community, Healthcare, and Legal Interpreting program only, OPI score, or equivalency, is required.

QUESTIONS? Call 302-477-2780

9.7.22