

Rule 42 Continuing Court Interpreter Education Accreditation Request Form

Mail/Fax/Email Form to:
 Administrative Office of the Courts
 Court Interpreter Program
 511 Union Street, Suite 600
 Nashville, TN 37219
 Fax: 615-741-6285/Email: Ryan.mouser@tncourts.gov

Provider Name: _____

- | | | |
|--|--|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Professional Organization | <input type="checkbox"/> Government Agency | <input type="checkbox"/> Educational Institution |

Address: _____

Telephone/Fax: _____ **E-Mail Address:** _____

Activity or Course Title: _____

Details:

Date(s) _____ Time(s) _____

Location _____ Registration Fee _____

Type of Course: In Person On-line

Name and Profession of each Instructor: (attach resume for each or statement of qualifications for each)

Course Materials to be used: (textbooks, videos, audiovisual equipment, etc.)

Session Description (Attach outline or syllabus, indicating the amount of time to be spent on each topic – 60 minutes is equivalent to 1 CEU unit)	Type of Credit Requested FL – Foreign Language OR G - General	Start Time	End Time	Credit Approval (Office Use Only)

<p>OFFICE USE ONLY</p> <p>Total FL CEU Approval: _____</p> <p>Total G CEU Approval: _____</p> <p>Date Approved: _____</p>
