



JUDICIAL COUNCIL
OF CALIFORNIA
COURT INTERPRETERS PROGRAM

2020 ANNUAL RENEWAL FEE

Covers the period January 1–December 31

Complete this form and return it with your payment

Name: _____
(first) (middle) (last)

Certification #/or Registration #: _____

E-mail: _____

- You must submit the annual \$100 renewal fee. **Payment must be received by March 1, 2021.**
- If payment is received **after the March 1** deadline you will be assessed a **\$50 late fee** (\$100 annual fee plus \$50 late fee). **Payment must be received by the first day of March** to avoid a late fee and potential suspension of certification or registration status.
- Payments received **between May 1 – June 30** will be assessed a \$250 reinstatement fee in addition to the \$100 annual renewal fee and the \$50 late fee.

	TOTAL DUE	MUST BE RECEIVED BY
Annual Fee (\$100)	\$100	March 1
Add late fee (\$50) if not received by March 1	\$150	April 30
Add reinstatement fee (\$250) if received between May 1 and June 30 (Suspension period)	\$400	June 30

Your certification or registration status will be REVOKED if payments are not received by June 30.

*Personal check, money order, or cashier's check payable to the **State of California***

**Mail: Judicial Council of California
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, CA 94102-3688**

Returned checks are subject to a \$15 return check fee

Remember to include the Information Update/Verification Form only if you have changes

Questions? email us at courtinterpreters@jud.ca.gov or visit our website at www.courts.ca.gov/courtinterpreters



Compliance for California Certified Court and Registered Interpreters

Name on badge:

Certification and/or Registration Number(s):

Language(s):

For the compliance period ending December 31, 2020:

(Please refer to your identification badge for the expiration date)

- I have completed 30 hours of Court Interpreter Minimum Continuing Education (CIMCE) activities as per the *Compliance Requirements for Certified Court and Registered Interpreters*.
- I have completed 40 court-related or other qualifying professional interpreting assignments as per the *Compliance Requirements for Certified Court and Registered Interpreters*.
- I understand the Judicial Council of California's Court Interpreters Program has the right to conduct an audit and that **I must maintain records verifying that I have completed all compliance requirements for 5 years.** Failure to provide documentation as requested could result in the imposition of sanctions up to and including suspension or revocation of my interpreting credential.
- I have read and understand the *Compliance Requirements for Certified Court and Registered Interpreters*, located at <http://www.courts.ca.gov/documents/CIP-Compliance-Requirements.pdf>

All boxes must be checked in order to be in compliance.

I declare under penalty of perjury, under the laws of the State of California that the above is true and correct:

Signature

Date



INFORMATION UPDATE/ VERIFICATION FORM
ALL INTERPRETERS: PLEASE FILL OUT FORM AND RETURN ONLY
IF YOU HAVE CHANGES

Name: _____ (Is this a new name? Yes/No)

Certification and/or Registration Number: _____

Contact information, including phone numbers and e-mail address, will be published on the Master List on the public Web site and may also be provided, along with your mailing address, to trial court personnel on request, unless you indicate otherwise below. The Master List may be used by the courts, other state agencies, and the public to locate and contact interpreters for assignments. The information is also used by the Judicial Council to contact you. Please make sure your information is kept up to date. It is your responsibility to notify the Judicial Council immediately of any changes.

Mailing address (required)

Street/P.O. Box: _____

City: _____ State _____ Zip Code: _____

County and State in which you live: _____

Please mark "X" in the box if you want the following information published to the Master List.

Home phone: (____) _____ Work phone: (____) _____

Cell: (____) _____ E-mail: _____

GEOGRAPHIC AVAILABILITY (Please circle all counties in which you are available to work)

- | | | | | | |
|----------------|----------------|--------------|--------------------|------------------|-------------------|
| 1 Alameda | 11 Glenn | 21 Marin | 31 Placer | 41 San Mateo | 51 Sutter |
| 2 Alpine | 12 Humboldt | 22 Mariposa | 32 Plumas | 42 Santa Barbara | 52 Tehama |
| 3 Amador | 13 Imperial | 23 Mendocino | 33 Riverside | 43 Santa Clara | 53 Trinity |
| 4 Butte | 14 Inyo | 24 Merced | 34 Sacramento | 44 Santa Cruz | 54 Tulare |
| 5 Calaveras | 15 Kern | 25 Modoc | 35 San Benito | 45 Shasta | 55 Tuolumne |
| 6 Colusa | 16 Kings | 26 Mono | 36 San Bernardino | 46 Sierra | 56 Ventura |
| 7 Contra Costa | 17 Lake | 27 Monterey | 37 San Diego | 47 Siskiyou | 57 Yolo |
| 8 Del Norte | 18 Lassen | 28 Napa | 38 San Francisco | 48 Solano | 58 Yuba |
| 9 El Dorado | 19 Los Angeles | 29 Nevada | 39 San Joaquin | 49 Sonoma | 59 Out of state |
| 10 Fresno | 20 Madera | 30 Orange | 40 San Luis Obispo | 50 Stanislaus | 60 All counties |
| | | | | | 62 Out of Country |

NAME CHANGE: If your name has changed please provide:

Former Name (as it appears on the Master List): _____

New Name _____

If you have changed your name, you will require a new badge. Please return this form along with a \$15 check, cashier's check, or money order payable to State of California. You will be charged \$15 for a returned check.

IDENTITY VERIFICATION

The following information is requested to verify your identity and *will not* be released:

California driver's license or ID #: _____ Expires: _____

Name as shown on my California driver's license or ID: _____

Social Security #: _____ - _____ - _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Judicial Council to release information contained herein, unless I have indicated otherwise.

Signature: _____ Date: _____

DECLARATION

I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand that any false or misleading statements may result in the forfeiture of my status as a certified court or registered interpreter and removal from the Judicial Council's Master List, in addition to other penalties provided by law.

Your new full name (print clearly): _____

Signature: _____ Date: _____

E-mail completed update form to:
courtinterpreters@jud.ca.gov

or mail it to:
Judicial Council of California
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, CA 94102-3688

For additional information, visit the website at www.courts.ca.gov/interpreters

Keep a copy of this completed form for your records.