

INTERPRETER GRANT CERTIFICATION FORM

Name of School Division/State-Operated Program

The following persons are providing educational interpreting services in our division/state-operated program and do not hold a current Virginia Quality Assurance Screening Level III or equivalent or higher national credential (Registry of Interpreters for the Deaf, National Interpreter Certification, National Association for the Deaf Level IV, or TECUnit [for cued speech]). I certify that:

- (a) a waiver of the qualification requirements will be submitted to the Virginia Department of Education within 30 days of assignment for the 2006-07 school year for all persons not meeting the qualification standards, as required by the Virginia Regulations, and
- (b) all persons not meeting the qualification standards will:
 - 1) be provided with a copy of the qualification requirements and informed of their qualification and waiver status,
 - 2) participate in VDOE funded grant activities (assessment, development of a training plan, enrollment in courses, and/or participation in other training) as a condition of employment.

Name	Current Qualifications

(attach additional sheets of paper, as necessary)

Director of Human Resources

(Name) _____

(Signature) _____

(Date) _____

Return to Dr. Debbie Pfeiffer, Virginia Department of Education, P.O. Box 2120, Richmond, VA 23218-2120; (804) 371-8796 fax