



ALABAMA LICENSURE BOARD FOR
Interpreters and Transliterators

P.O. Box 240187 Montgomery, AL 36124-0187 Phone: (334) 277-8881 Fax: (334) 277-0188

Deaf Interpreter & Transliterators Exemption request

First Name: _____ **Middle Initial:** _____ **Last Name:** _____

Date of Birth: ____/____/____ **SS #** ____-____-____

Home Address: _____

City: _____ **State:** _____ **Zip Code:** _____ **County:** _____

Home Phone: ____-____-____ **Cell Phone:** ____-____-____

Email Address: _____

Current Employer: _____

Address: _____

Please answer all questions and attach any supporting documentation

	YES	NO
1. Are you currently charged with, or ever been convicted of a felony or misdemeanor?	_____	_____
2. Do you have any physical, mental or emotional impairments that would hinder your ability to perform duties assigned in the profession ?	_____	_____
3. Are you or have you ever been addicted to alcohol or drugs?	_____	_____
4. Have you ever been treated for alcohol/substance abuse in a treatment center, hospital, or outpatient setting? If yes, give name of institution, date and length of treatment.	_____	_____
5. Has any state licensing board refused, revoked or suspended a certificate/license issued to you or taken other disciplinary action?	_____	_____
6. Have you ever voluntarily or otherwise surrendered your license or certification/ registry in any jurisdiction, state or territory?	_____	_____
7. Are you currently under investigation by any licensing board or agency?	_____	_____
8. Have you had any suits filed against you or your employer on your behalf?	_____	_____
9. Are you an Citizen of the United States of America?	_____	_____

List all credentials and or training: _____

I affirm that all the information and documentation contained herein is correct, to the best of my knowledge. I have reviewed and understand the requirements for annual renewal. I further understand that this license limits holder to provide services in specific area for which license has been issued.

You must include all of the following:

- This notarized application
- One of the following :
 GED, High school diploma or certified transcripts or college diploma or college certified transcripts
- Documentation from a licensed practice physician stating that you are legally deaf.
- Proof of Citizenship Form
- Proof of Citizenship

Sworn to and subscribed before me this the
_____ day of _____, 20____

Notary Public

Form valid for RP 1st only SB473-06-04

In order to demonstrate U.S citizenship for a public records transaction a person must present the (1) original, (2) a legible photocopy, or (3) a digital or electronic copy of one of the following:

- (1) A driver's license or nondriver's identification card issued by the Alabama Department of Public Safety or the equivalent governmental agency of another state within the United States, provided that the governmental agency of another state within the United States requires proof of lawful presence in the United States as a condition of issuance of the driver's license or nondriver's identification card.
- (2) A birth certificate indicating birth in the United States or one of its territories.
- (3) Pertinent pages of a United States valid or expired passport identifying the person and the person's passport number, or the person's United States passport.
- (4) United States naturalization documents or the number of the certificate of naturalization.
- (5) Other documents or methods of proof of United States citizenship issued by the federal government pursuant to the Immigration and Naturalization Act of 1952, as amended.
- (6) Bureau of Indian Affairs card number, tribal treaty card number, or tribal enrollment number.
- (7) A consular report of birth abroad of a citizen of the United States of America.
- (8) A certificate of citizenship issued by the United States Citizenship and Immigration Services.
- (9) A certification of report of birth issued by the United States Department of State.
- (10) An American Indian card, with KIC classification, issued by the United States Department of Homeland Security.
- (11) Final adoption decree showing the person's name and United States birthplace.
- (12) An official United States military record of service showing the applicant's place of birth in the United States.
- (13) An extract from a United States hospital record of birth created at the time of the person's birth indicating the place of birth in the United States.
- (14) AL-verify.
- (15) A valid Uniformed Services Privileges and Identification card.
- (16) Any other form of identification that the Alabama Department of Revenue authorizes, through an administrative rule promulgated pursuant to the Alabama Administrative Procedure Act, to be used to demonstrate or confirm a person's United States citizenship or lawful presence in the United States, provided that the identification requires proof of lawful presence in the United States as a condition of issuance.