



ALABAMA LICENSURE BOARD FOR Interpreters and Transliterators

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

Permit Application

This application is for persons who have proof of successfully passing a code of ethics test (as approved by ALBIT) and a performance test (as approved by ALBIT) and are applying for a renewable permit for the first time.

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

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

_____**Home Address:**_____

****Preferred**

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

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

Email Address: _____

Current Employer: _____

_____**Address:**_____

****Preferred**

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

Work Phone: ____-____-____ **Work Fax:** ____-____-____

Work Email: _____

*Information published on the ALBIT Roster for public dissemination will include Name, ****Preferred** Mailing Address, License or Permit and Expiration Date. All other information will remain confidential.*

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.

Applicant Signature _____
Date

Please list all credentials (MANDATORY): _____

- You must include all of the following:**
- This notarized application
 - A \$50.00 application fee Check# _____
 - A \$125.00 Permit fee Check # _____
 - Documentation of passing a Code of Ethics exam, as approved by ALBIT
 - Documentation of passing a Performance Assessment, as approved by ALBIT
 - Documentation of Continuing Education Units from the last year
 - Affidavit of application
 - Diploma/certified transcripts

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

Notary Public

My commission expires: ____/____/____