

# Interpreter Training Program

For Admission: Fall 2025

## **Program Application Booklet**



**Interpreter Training Program**  
3410 W Whistalks Way MS 3160  
Spokane, WA 99224-5288

[www.sfcc.spokane.edu/ITP](http://www.sfcc.spokane.edu/ITP)



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**GENERAL INFORMATION**

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Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

**APPLICATION DEADLINE:** Noon, Friday, March 7, 2025.

Preference will be given to on-time applications. Late applications received after the acceptance date will be reviewed for alternate status only.

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- Apply for admission to Spokane Falls Community College (SFCC).**  
Contact Admissions at 509-533-3503 or sfcc.spokane.edu.
    - If you are enrolled at Spokane Community College (SCC), you still must apply to SFCC.
    - If you have previously been enrolled at SFCC, you must reactivate your application.
  - Complete this application booklet.**
    - Include the unofficial copy of all college transcripts with your application (including SFCC and SCC). A Degree Audit is not acceptable. (If you don't already have a copy, most schools have the information available online.)
    - Request an official transcript and an unofficial copy of each transcript from each college you have attended. If official transcripts are on file, skip this section.
    - Have the official transcript(s) sent directly to:  
Spokane Falls Community College  
Admissions Office MS 3011  
3410 W. Whistalks Way  
Spokane, WA 99224-5288
  - Page 4:** Complete the Demographic Information and College Education page. *(Total points possible: 6)*
  - Page 5:** Sign the Background Check Acknowledgement. *(Total points possible: 4)*
  - Pages 6-7:** Complete the Student Response Form. *(Total points possible: 49)*
  - Page 8:** Complete the Coursework Summary page. *(Total points possible: 8)*
    - Use your **unofficial transcripts** to prove your coursework by highlighting the appropriate courses.
  - Page 9-12:** Permission for mid-term grades (if currently enrolled while in process of applying).
    - Fill in the information and notify your instructor that we will be contacting them.
  - Page 13-14: Two video clips of your English and signing skills:** *(Total points possible: 50)*
    - 2-4 minutes in length.
    - See details on page 13 and uploading directions on page 14.
  - Prepare a cover letter:** *(Total points possible: 9)*
    - The letter should be addressed to the Interpreter Training Program Admissions Committee and should include what makes you an outstanding applicant for the Interpreter Training Program.
  - Two letters of recommendation.** See details on page 15. *(Total points possible: 8)*
    - One letter regarding your character.
    - One letter regarding your work ethic (either academically or at the job).

- Submit your application.** It should appear professional and organized. See email address below.
  - FACULTY DISCRETION: POTENTIAL INTERVIEW:** The applicants may be invited for an interview within 60 days after application deadline.
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### **Checklist**

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- Verify all parts of your completed application. Your application includes the following, in order:
    - Pages 4-8 of this booklet
    - Copies of all your transcripts
    - Pages 9-11 (if needed) — Permission for Mid-quarter ASL Grades
    - Two Video clips/urls (2-4 minutes in length / uploading directions on page 13-14)
    - Cover letter
    - Two letters of recommendation (information on page 15)
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### **Submit Application**

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- Submit all application requirements electronically - application and videos must be within one email. You will need the capability to scan your documents because applications must be handwritten. Once application is completed with all parts included (see checklist above), send document to:  
TO: [Corrine.Morrow@sfcc.spokane.edu](mailto:Corrine.Morrow@sfcc.spokane.edu)  
SUBJECT LINE: [First initial.Last name] – ITP Application

You will be notified within 60 days after application deadline.



# INTERPRETER TRAINING PROGRAM APPLICATION

## DEMOGRAPHIC INFORMATION

Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_  
(cell/text number) (alternate)

E-mail \_\_\_\_\_

(optional)  male  female Age range: \_\_\_\_\_

Ethnicity \_\_\_\_\_

What is your native language? \_\_\_\_\_

While attending the SFCC – ITP, where will you be located:

(City and state) \_\_\_\_\_

Will you be an:  online OR  on-ground student of the program?

Are you a veteran, on active duty, military, reserve service, or member of Washington National Guard?  Yes  No

Are you the spouse of a veteran, active military, reserve service, or member of National Guard?  Yes  No

Do you have any D/deaf members as friends or in your family?  Yes  No

Do you have Sign Language Interpreters as friends or in your family?  Yes  No

Have you previously applied to our program?  Yes  No

Are you currently enrolled at: SFCC  Yes  No SCC  Yes  No

Are you taking MATH&107, PSYC&100, PSYC&200, or ENG&101 this Spring Quarter? (if yes, circle all that apply)  Yes  No

Are you taking ASL&121, ASL&122, ASL&123 this Spring Quarter? (if yes, circle the one that applies)  Yes  No

Would you be willing to attend a five-week applied interpreting experience in a small rural community (with housing available) while in the program?  Yes  No

Would you be willing to be employed in a small rural community following graduation?  Yes  No

REGION \_\_\_\_\_ Explanation: \_\_\_\_\_

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**BACKGROUND CHECK**

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The Interpreter Training Program (ITP) prepares students for a career as an ASL – English Interpreter for the Deaf in the public school system. An important part of this process is the internship/practicum experience. Students must pass fingerprinting and background check requirements in their state of residence to be eligible to work with children and vulnerable adult populations. For more information on background clearance and access to the Background Check Form, please visit your state’s background check requirements. Washington State Patrol – WSP WATCH website: <https://fortress.wa.gov/wsp/watch/>

I have read and understand the above statement.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

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**ESSENTIAL FUNCTIONS ACKNOWLEDGEMENT**

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The Interpreter Training Program (ITP) prepares students for a career as an ASL – English Interpreter for the Deaf in the public school system. The following information is provided to assist you in achieving a better understanding of the sensory, physical, communication, cognitive, behavioral, social, and professional skills necessary to successfully work as an Interpreter for the Deaf/Hard-of-Hearing/Cochlear-Implanted. These criteria are identified as being essential functions for success for Interpreters and as such, closely match the abilities needed to successfully complete the assignments and practicum components of the ITP program at SFCC. Students must be able to meet these minimum standards throughout the program, with or without reasonable accommodation, for successful completion of the program requirements.

Spokane Falls Community College provides reasonable accommodation to qualified students with disability so that they can meet these required standards. If you are disabled and need accommodations, please contact the program supervisor of Disability Access Services program at 509.533.4166.

I have reviewed the Essential Functions for an Interpreter’s Success, as outlined on pages 8 – 10, of the Interpreter Training Program Information Booklet. I am aware of the physical, cognitive, behavioral, and social professional standards required to complete the Interpreter Training Program, with or without reasonable accommodations.

Signature \_\_\_\_\_

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**STUDENT RESPONSE FORM**

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Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

*Please handwrite your responses only. If handwriting is a barrier, accommodation requests are welcome. Points will be deducted for typed responses unless accommodation request has been approved. In order to receive full credit for your response to each question — answers should be 75-100 words. You may use a separate sheet of paper.*

1. How did you become interested in the field of Interpreting for the Deaf?  
(Please include information regarding prior work, educational and/or personal experience).

2. Please describe the role of an Educational Interpreter for the Deaf vs. someone able to socially communicate as you understand it.

3. How do you handle new situations (some may be challenging because they are different and others may be about realizations of self)?

4. What are your short-term professional interpreting goals (after graduation – 1 year)?

5. What are your long-term professional interpreting goals (2 - 5 years after graduation)?

6. What are your experiences with D/deaf culture, American Sign Language and D/deaf individuals?

7. Please share something about yourself that is not included within the application that would be of interest to the ITP selective admissions committee.

# INTERPRETER TRAINING PROGRAM APPLICATION

## COURSEWORK SUMMARY

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

- Based on your transcripts, complete the following page about the coursework taken.
- IMPORTANT:** We must have an unofficial copy of your transcript(s) for points to be verified (this includes classes taken Winter Quarter 2025).
- NOTE:**
- Points for academic work older than 5 years shall be evaluated on a case-by-case basis.
  - Financial aid may be reduced if you have completed ENGL&101, MATH107, and/or PSYC& 200 prior to acceptance in the Interpreter Training Program.

### PREREQUISITES

COURSE	PROGRESS / COMPLETION	SEMESTER OR QUARTER	# OF CREDITS	SCHOOL WHERE TAKEN	GRADE	POINTS (PROGRAM USE ONLY)
ASL&121	<input type="checkbox"/> In Progress <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
ASL&122	<input type="checkbox"/> In Progress <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
ASL&123	<input type="checkbox"/> In Progress <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
MATH 107	<input type="checkbox"/> Ready <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
MATH 87	<input type="checkbox"/> In Progress <input type="checkbox"/> Completed					
MATH 88	<input type="checkbox"/> In Progress <input type="checkbox"/> Completed					
ENGL& 101	<input type="checkbox"/> Ready (within 5 yrs of high school transcripts submitted or English Placement) <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
PSYCH& 200	<input type="checkbox"/> Ready <input type="checkbox"/> Completed	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				
PSYCH &100 –	<input type="checkbox"/> Completed <input type="checkbox"/> General Psych (equivalent completed)	<input type="checkbox"/> Sem <input type="checkbox"/> Qtr				

### COLLEGE EDUCATION

HIGHEST DEGREE/DIPLOMA	DATES		INSTITUTION	LOCATION	POINTS (PROGRAM USE ONLY)
	FROM	TO			
<input type="checkbox"/> AA					
<input type="checkbox"/> AAST					
<input type="checkbox"/> BA/BS					
<input type="checkbox"/> MA/MS					
<input type="checkbox"/> Phd					

• Do not list if degree was not awarded.

**Total Points:**



# INTERPRETER TRAINING PROGRAM APPLICATION

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## MID-QUARTER GRADES PERMISSION ASL&122

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If you are planning to take **ASL&122** during Spring Quarter, then you **must** complete this form in order for us to consider your mid-quarter grades in calculating your points for acceptance in the program. Please note that your final grades in **ASL&122** must meet or exceed your mid-quarter grades to be assured a position in the program.

**NOTE:** As a courtesy, please inform your instructor that you have completed this form and an instructor from SFCC ITP will be calling and/or emailing requesting confirmation of this document's information.

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Course Name and Number \_\_\_\_\_

College Name \_\_\_\_\_

Instructor's Information:

- Name \_\_\_\_\_
- E-mail \_\_\_\_\_
- Phone Number \_\_\_\_\_
- Fax Number \_\_\_\_\_
- Date mid-term grade will be available \_\_\_\_\_

I give permission for my mid-quarter **ASL&122** grades to be reported to Spokane Falls Community College Interpreter Program at their request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

# INTERPRETER TRAINING PROGRAM APPLICATION

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## MID-QUARTER GRADES PERMISSION ASL&123

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If you are planning to take **ASL&123** during Spring Quarter, then you **must** complete this form in order for us to consider your mid-quarter grades in calculating your points for acceptance in the program. Please note that your final grades in **ASL&123** must meet or exceed your mid-quarter grades to be assured a position in the program.

**NOTE:** As a courtesy, please inform your instructor that you have completed this form and an instructor from SFCC ITP will be calling and/or emailing requesting confirmation of this document's information.

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Course Name and Number \_\_\_\_\_

College Name \_\_\_\_\_

Instructor's Information:

- Name \_\_\_\_\_
- E-mail \_\_\_\_\_
- Phone Number \_\_\_\_\_
- Fax Number \_\_\_\_\_
- Date mid-term grade will be available \_\_\_\_\_

I give permission for my mid-quarter **ASL&123** grades to be reported to Spokane Falls Community College Interpreter Program at their request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

# INTERPRETER TRAINING PROGRAM APPLICATION

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## MID-QUARTER GRADES PERMISSION PSYC&100

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If you are planning to take **PSYC&100** during Spring Quarter, then you **must** complete this form in order for us to consider your mid-quarter grades in calculating your points for acceptance in the program. Please note that your final grades in **PSYC&100** must meet or exceed your mid-quarter grades to be assured a position in the program.

**NOTE:** As a courtesy, please inform your instructor that you have completed this form and an instructor from SFCC ITP will be calling and/or emailing requesting confirmation of this document's information.

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Course Name and Number \_\_\_\_\_

College Name \_\_\_\_\_

Instructor's Information:

- Name \_\_\_\_\_
- E-mail \_\_\_\_\_
- Phone Number \_\_\_\_\_
- Fax Number \_\_\_\_\_
- Date mid-term grade will be available \_\_\_\_\_

I give permission for my mid-quarter **PSYC&100** grades to be reported to Spokane Falls Community College Interpreter Program at their request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

# INTERPRETER TRAINING PROGRAM APPLICATION

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## MID-QUARTER GRADES PERMISSION MATH 87 OR MATH 88

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If you are planning to take **MATH 87** or **MATH 88** during Spring Quarter, then you **must** complete this form in order for us to consider your mid-quarter grades in calculating your points for acceptance in the program. Please note that your final grades in **MATH 87** or **MATH 88** must meet or exceed your mid-quarter grades to be assured a position in the program.

**NOTE:** As a courtesy, please inform your instructor that you have completed this form and an instructor from SFCC ITP will be calling and/or emailing requesting confirmation of this document's information.

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Course Name and Number \_\_\_\_\_

College Name \_\_\_\_\_

Instructor's Information:

- Name \_\_\_\_\_
- E-mail \_\_\_\_\_
- Phone Number \_\_\_\_\_
- Fax Number \_\_\_\_\_
- Date mid-term grade will be available \_\_\_\_\_

I give permission for my mid-quarter **MATH 87** or **MATH 88** grades to be reported to Spokane Falls Community College Interpreter Program at their request.

Signature \_\_\_\_\_

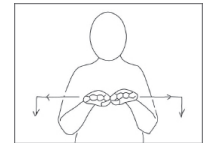
Date \_\_\_\_\_

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## VIDEO CLIPS

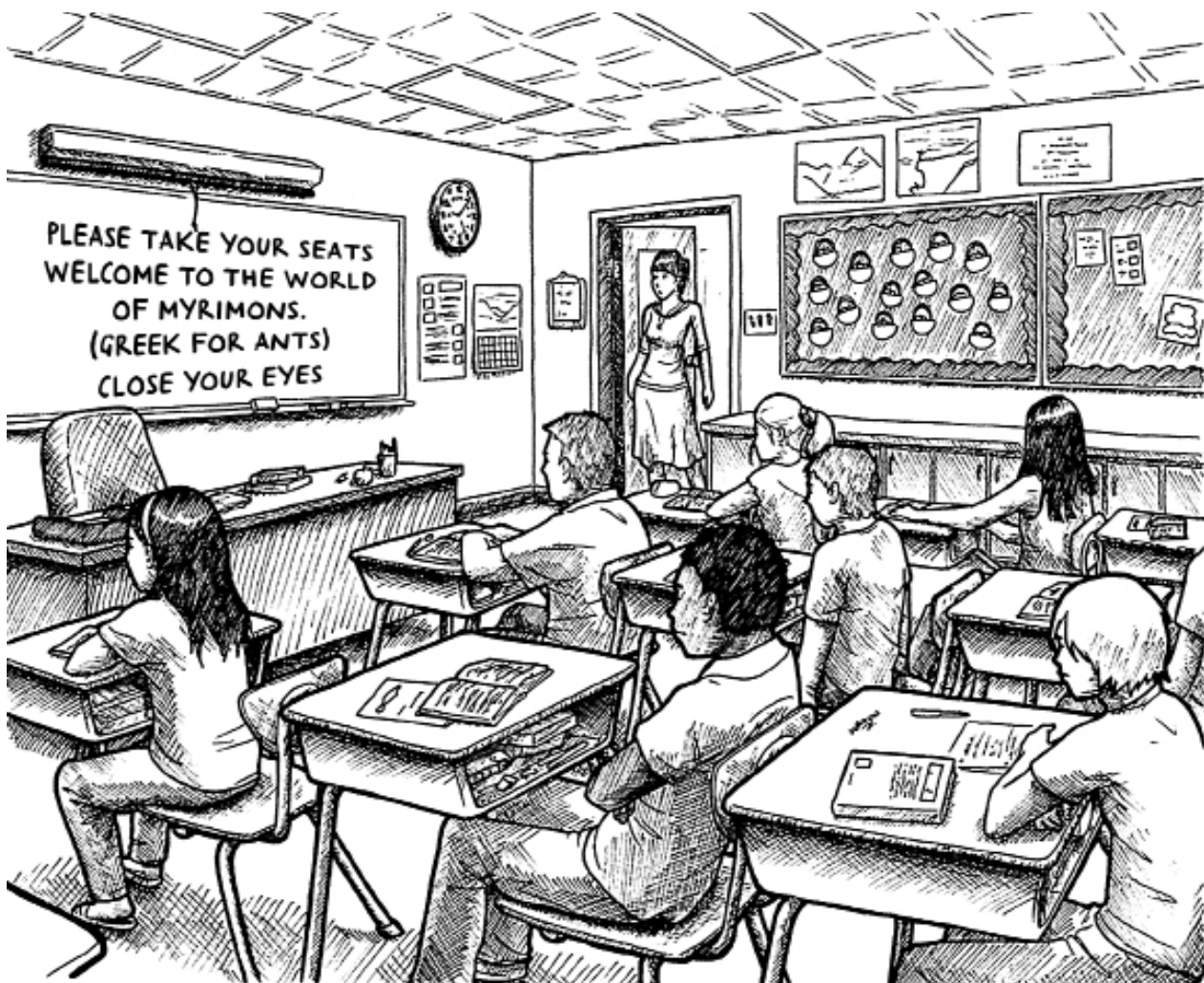
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**Example:**



Each video clip should be 2–4 minutes, head to waist high in the lens frame (*see example*), and have appropriate background/lighting.

- VIDEO CLIP #1: Using ASL without your voice, tell us about your background; how you learned ASL; why you want to be an interpreter; and why you want to join the Interpreter Training Program.
- VIDEO CLIP #2: Using ASL signs and grammatical aspects without your voice, describe the line drawing below.



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## Directions to Include Videos with Your Application

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### UPLOADING YOUR SFCC ITP APPLICATION VIDEO CLIP TO YOUTUBE:

1. Make your video clips as directed on previous page.
2. After you have completed the video clip. Save it to your recording device.
3. Login to your Gmail account.  
(If you do not have a Gmail account, please create an account).
4. Login to: YouTube.com <https://www.youtube.com>
5. Set your Privacy Permissions to “Unlisted”, so that only the SFCC ITP and yourself can view your work.
6. At top right of page, select (click) the “+video camera” icon.
7. Choose Upload video.
8. Click on the “circle with the upload” icon (center of page), File Manager will open, Drag and drop the file to upload.
9. Complete the process for uploading the video.
10. Please label the video clip: Last Name, First Name, SFCC ITP, Application video, 2025
11. Locate the video link for the video.
  - a. List video links below:  
  
Introduction video of self – signed in ASL (no voice)  
  
URL Link #1 \_\_\_\_\_  
  
Line drawing description – signed in ASL (no voice)  
  
URL Link #2 \_\_\_\_\_
  - b. Copy and paste the video links into **one email** to: [Corrine.Morrow@sfcc.spokane.edu](mailto:Corrine.Morrow@sfcc.spokane.edu)  
Email must include: Your name, SFCC ITP, Application 2025 video and video link.

*NOTE: Set your Privacy Permissions to “Unlisted”, so that only the SFCC ITP and yourself can view your work.*

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## LETTER OF RECOMMENDATION

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Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Please give this form to two people from whom you are requesting a letter of recommendation.

**NOTE:** Your recommendations need to be from people who know your character as an individual and your work ethic, academically or employment - and need to be included with the completed application and other supplemental materials:

1. One letter regarding your character traits and attributes.
  2. One letter regarding your work ethic (either academically or on the job).
- 

About the *Letter of Recommendation* - please provide to the letter writers the information below:

Dear Colleague:

(Student name) is applying to the Interpreter Training Program at Spokane Falls Community College. This is a competitive application process and your letter of recommendation is important to the Application Committee. In your letter, please address as much of the following as you are able:

- How long you have known the applicant and in what capacity.
  - Please share your opinion on the applicant's ability to be a successful student because of:
    1.  the applicant's work ethic (either academically or on the job).
- OR
2.  the applicant's character traits and attributes.
- Any concerns you have regarding this applicant entering the educational setting as an Interpreter for a Deaf / Hard of Hearing / Cochlear Implanted Child.
  - Your credentials and letter should be on your professional letterhead, if possible.



Spokane Colleges does not discriminate on the basis of race, color, religion, national origin, sex, disability, sexual orientation or age in its programs, activities or employment.  
Direct all inquiries regarding equal opportunity compliance and/or grievances to chief strategy and administration officer,  
Spokane Colleges, 501 N. Riverpoint Blvd., P.O. Box 6000, MS 1004, Spokane, Wash. 99217-6000 or call 509-434-5037.  
Direct all inquiries or grievances regarding access and Title IX to the chief compliance officer,  
2917 W. Whistalks Way, MS 3027, Spokane, Wash. 99224, or call 509-279-6012.  
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