



Language Access Professional Bio

CONTACT INFORMATION

Date _____

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell _____

Fax _____ Email _____

EXPERIENCE

How many years of experience? _____

Certified Yes No Type _____

Pre-Certified Yes No Written Test? _____ Passed? _____

Typing Speed _____ **wpm**

Type of experience (Check all that apply)

- | | | | |
|---|---|-------------------------------------|--|
| <input type="checkbox"/> Legal | <input type="checkbox"/> Medical | <input type="checkbox"/> Business | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Educational K-12 | <input type="checkbox"/> Post secondary | <input type="checkbox"/> Religious | <input type="checkbox"/> Government |
| <input type="checkbox"/> Video Interpreting | <input type="checkbox"/> Community | <input type="checkbox"/> Theatrical | <input type="checkbox"/> Conference |
| <input type="checkbox"/> Other _____ | | | |

SERVICES OFFERED

In Person Remote

WHAT TYPE OF EQUIPMENT DO YOU HAVE?

WHAT TYPE OF DICTIONARIES DO YOU HAVE?

AREAS OF COVERAGE

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Antelope Valley | <input type="checkbox"/> San Fernando Valley | <input type="checkbox"/> Santa Clarita Valley | <input type="checkbox"/> Orange County |
| <input type="checkbox"/> LA Metro | <input type="checkbox"/> South Bay / South LA | <input type="checkbox"/> Glendale/Pasadena | <input type="checkbox"/> Riverside |
| <input type="checkbox"/> San Bernardino | <input type="checkbox"/> Inyo & Kern County | | |
| <input type="checkbox"/> Other _____ | | | |

MEMBERSHIPS

AGENCIES
