



# RivInt Interpretation and Translation Services

Managed by the Elspeth Heyworth Centre for Women

2350 Finch Ave. West, Unit D, Toronto, ON M9M 2C7 | Phone 416.663.0606 | Fax 416.663.1232 | rivint@ehcw.ca

## Interpreter's Information Sheet

Date of registration/update

(Month)	(Day)	(Year)

Name: 

(First)	(Middle Initials)	(Last)

Date of Birth: 

(Month)	(Day)	(Year)

 Gender: 

(Male)	(Female)

 Are you eligible to work in Canada?

Mailing Address:

City: 



 Province: 



 Postal Code:

E-mail Address: 



 HST #:

Primary Phone #: 



 Secondary Phone #:

Primary Language: 



 CILSAT/ILSAT or IRB/MAG: 



  
Are you ATIO Certified (Court/Conf. /Trans.):

Additional Languages: 



 Country of Origin:

Do you perform simultaneous interpretation (Yes/No): 



 If Yes, which language(s):

Training: 



 Date:

Medical Terminology: 



 Canadian Law Terminology:

Availability (Please indicate the times you are available and "X" when you are not, e.g. Monday 9am-5pm):

Days/Time Frame	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings							
Afternoon/Evening							
Midnights							

Do you have any concern interpreting for the following (Yes/No):

Abortion:		HIV:		TB:	
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Do you have access to vehicle (Yes/No):

Are you willing to travel within province?

Additional information: