



IRISH TRANSLATORS' & INTERPRETERS' ASSOCIATION
CUMANN AISTRITHEOIRÍ AGUS ATEANGAIRÍ NA HÉIREANN

Application Form for Professional Membership

Deadline for receipt of applications: 5 pm on Friday, 10 December 2021 by email

(Please read the document *ITIA PM Application Procedure* carefully before completing this form.)

Please use BLOCK letters

Title (Dr/Mr/Mrs/Ms/other): _____

Are you a member of another FIT association?

Surname: _____

(please give details and category of membership)

First name: _____

Address: _____

Current occupation: _____

Freelance employment: How long have you been working
as a freelance translator or interpreter? _____

Tel: _____

Full-time or part-time? _____

Mobile: _____

Staff employment: Please give name of current/last
employer: _____

Email: _____

Website: _____

Date of birth: _____

How long have you been working as a staff translator or
interpreter? _____

Country of birth: _____

Nationality: _____

Full-time or part-time? _____

Mother tongue: _____

Please list the type of proof of experience you are

Qualification(s) (Undergraduate, Postgraduate etc.):

supplying (employment contract, POs, invoices, tax returns
etc.)? _____

Are you a member of the ITIA? _____

Category and date you joined: _____



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I would like to be assessed in the following language combination*:

Source language: _____ Target language: _____

* One of these languages must be one of the official languages of Ireland (English or Irish).

Please note: Where the target language is not the candidate's native language, it must be the language of habitual use and of 'near-native' level.

I would like to be assessed in the following area of specialisation (please tick **one** of the following):

Business/Finance (); Technology/Engineering (); Medical/Pharmaceutical (); Legal ()

The Professional Membership Examination will take place on

Friday, 25 February 2022 (language combinations out of English) and
Saturday, 26 February 2022 (language combinations into English)

I am available to take the examination on the date/dates specified above () Yes () No

Please note: The examination is fixed.

I have attended the compulsory Professional Membership webinar. Date: _____

Please indicate date of payment of the €60 administration fee (€30 for ITIA members): _____

(ITIA bank details: <https://www.translatorsassociation.ie/itia-membership-fees/>.)

Please include the payment reference "Your Surname + PM". Please do not send any other fee at this time. Payment by PayPal is not possible at the moment.

All applications must be accompanied by:

- () Completed application form including
 - () Proof of relevant qualification(s)
 - () Proof of relevant experience
 - () Summary of professional experience incl. client details (see page 4)
 - () Contact details of 2 professional referees (see page 5)
 - () Signed declaration (see page 6). Please see the ITIA Code of Practice and Professional Ethics (ITIA website)
- () Full CV
- () Non-refundable administration fee (€60 or €30 as applicable)
- () 2 professional references
- () Statement of your reasons for wishing to become a professional member of the ITIA



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Please note that each language combination requires a separate application. However, it is sufficient that one set of supporting documents, one signed declaration and one registration fee be submitted in this case.

The next deadline for receipt of applications for Professional Membership of the ITIA is

5 pm, Friday, 10 December 2021 by email to info@translatorsassociation.ie

Please note that incomplete applications or applications received after the deadline will not be considered. The onus is on the applicant to ensure that the application includes all necessary supporting documentation and information.

If my application is successful, I consent to the ITIA keeping my application on record and including my details on the online database for the duration of my membership.

I have read, understood and accept the procedure as set out in the document *ITIA PM Application Procedure*.

Signature: _____ Date: _____

Please send your completed application by email to:

info@translatorsassociation.ie

to arrive no later than **5 pm on Friday, 10 December 2021**

The ITIA Professional Membership sub-committee reserves the right to modify, delete or add to any aspect of the application procedure. The final decision on approval as a Professional Member of the ITIA lies with the ITIA Professional Membership Sub-Committee



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Summary of Professional Experience – Main Clients*

Total years of experience:

Dates		Client / contact email	Working languages		Total word count / line count / hours / days
From	To		From	Into	

* Summary of professional experience may be a combination of translation and interpreting work
Please note: proof of professional experience has to be provided separate to the above list

I certify that the above information is correct.

Signature: _____ Date: _____



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Professional Referees*

First Referee

Name: _____

Organisation: _____

Address: _____

Telephone/Mobile nos.: _____

Email: _____

Professional relationship _____

Second Referee

Name: _____

Organisation: _____

Address: _____

Telephone/mobile nos.: _____

Email: _____

Professional relationship _____

*Please ensure that the two referees named above are aware that they will be contacted by the ITIA.

Professional referees may not be friends or family members.



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Code of Practice and Professional Ethics

Declaration

I, (name) _____

have read and understood the Code of Practice and Professional Ethics of the Irish Translators' and Interpreters' Association / Cumann Aistritheoirí agus Ateangairí na hÉireann and hereby agree to abide by it.

Signature: _____

Date: _____