

Application Form for Professional Membership

Deadline for receipt of applications (by email only): TBC

(Please read the document *ITIA Professional Membership application procedure* carefully before completing this form)

I am applying under the following (please tick **ONE** of the following **ONLY**) channel

I have a primary degree or postgraduate qualification in translation and/or interpreting awarded by an Irish third-level institution or similar foreign institution recognised by the Irish Translators' and Interpreters' Association

OR

I have been an Associate member of the ITIA for a minimum of 3 years

I attended the compulsory Professional Membership information webinar on (date): _____

Title (Dr/Mr/Mrs/Ms/other):	First name:	Surname:
Address:		
Mobile no.:		
Email:		
Website:		
Date of birth:		
Place of birth:		
Nationality:		
Mother tongue(s):		

Full title(s) in English of my qualification(s) (Undergraduate, Postgraduate, etc.) and country where awarded:	
Current occupation:	
<p>I am a: Translator () Interpreter () Translator and Interpreter () Freelance () Staff () If Staff, please provide the name of your current/most recent employer and the duration of your employment:</p>	<p>I work: Full-time () Part-time ()</p> <p>Please indicate the type of proof of experience you are supplying with this application (employment contract, POs, invoices, tax returns, etc.):</p>
ATII membership no., where applicable:	If you are a member of another association, please provide the name of the association and category:

<p>I would like to be assessed in the following language combination(s) (max. two) and specialisation(s). At least one of the languages must be one of the official languages of Ireland (English or Irish):</p> <p>1) Source language: Target language: 2) Source language: Target language:</p> <p>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.</p>
<p>I would like to be assessed in the following area of specialisation (please tick one of the following per language combination). You may choose the same or different specialisations:</p> <p>Business/Finance; Technology/Engineering; Medical/Pharmaceutical; Legal</p> <p>Language combination 1): Language combination 2):</p>

The Professional Membership Examination will take place on

February 2025 TBC (language combinations out of English) and

February 2025 TBC (language combinations into English).

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

Please note: The examination dates are fixed and cannot be changed.

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).

() Full CV

() Non-refundable administration fee (€60 or €30 as applicable)

() Statement of your reasons for wishing to become a professional member of the ITIA

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

ITIA bank details: <https://www.atii.ie/membership/membership-fees/>

Please note: Payment by PayPal is not possible at the moment.

Please include the payment reference "Your Surname + PM". Please do not send any other fee at this time.

Please note that each language combination requires a separate application form (pages 1 to 3).

However, it is sufficient that 1 set of supporting documents, 1 signed declaration and 1 registration fee be submitted in this case.

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

November 2024 TBC

by email to info@atii.ie



ATII

Association of Translators
& Interpreters Ireland
Cumann Aistritheoirí
& Ateangairí na hÉireann

E: info@atii.ie
W: atii.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. All times and dates are Irish.

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 declare that the information provided by me with this application is true and accurate.

I have read, understood and I accept the procedure as set out in the document *ITIA Professional Membership application procedure*.

Signature: _____ Date: _____

***The ATII 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 ATII lies with the
ATII Executive Committee***



Summary of Professional Experience – Main Clients*

Total years of professional 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 declare that the above information is correct.

Signature: _____ Date: _____



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 2 referees named above are aware that they will be contacted by the ITIA.
Professional referees may not be friends, colleagues or family members.



ATII

Association of Translators
& Interpreters Ireland
Cumann Aistritheoirí
& Ateangairí na hÉireann

E: info@atii.ie
W: atii.ie

Declaration

I, (name in BLOCK CAPITALS) _____

have read and understood the

- Constitution of the Irish Translators' & Interpreters' Association
- ITIA Code of Practice and Professional Ethics,
- ITIA Internal Code of Conduct,
- ITIA Code of Ethics for Community Interpreters (where applicable)
- Logo Policy
- Data Privacy Policy
- Cookies Policy

and I hereby agree to abide by them on becoming a Professional Member.

Signature: _____

Date: _____