



COMMONWEALTH OF PUERTO RICO
DEPARTMENT OF STATE
ASSISTANT SECRETARIAT FOR PROTOCOL AFFAIRS

UNOFFICIAL REGISTRY FOR TRANSLATORS AND INTERPRETERS OF PUERTO RICO - Registration Form

[Fill out this form and send it by mail to, Department of State, Translations, Proclamations and Cultural Promotion Office, Attention: Mrs. Lourdes Hernández, Director, P. O. Box 9023271, San Juan, Puerto Rico 00902-3271; or by fax to, (787) 721-3191. Please note that this agency reserves its right to include in the Registry all the information herein provided.]

Name _____

Municipality of residence _____

Please specify if you are a, _____ translator _____ interpreter _____ both

Years of experience as a translator/interpreter

Languages in which you are proficient and into which you translate ---

Areas in which you specialize (legal, medical, commercial, general)

Academic degrees and the institutions from which they were obtained

Other studies (continuing education, graduate and postgraduate)

Professional associations of which you are a member _____

Firms where you have worked as a professional translator _____

Please specify if you have another occupation other than translating and how many hours do you dedicate to the professional practice of translation

Add any information that you consider is pertinent to include in this Registry _____

CONTACT INFORMATION

Mailing address _____

Telephone numbers _____

Fax number _____

Electronic mail _____

CERTIFICATION AND AUTHORIZATION FOR DISCLOSING INFORMATION

I, _____, hereby certify that all the information provided in this form is true and accurate and I hereby authorize its disclosure only for professional contracting purposes, which are the sole reason why this Unofficial Registry for Translators and Interpreters of Puerto Rico was originally created.

Signature

Date