



202 Application Instructions:

6 DYH DSSOLF/DWWRQ DPH) LUVW \$\$\$OLFASWELRQ ´
Email completed application to the ASLIS Administrative Coordinator & Academic Advisor ±
Kate.Beilmann@unco.edu

Note: Applications submitted by April 15th each year, are given priority consideration.

American Sign Language ±English Interpretation (ASLEI) B.A. Program Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Preferred Phone Number: _____ Personal Email _____

Bear Mail: _____ Bear Number: _____

Program Interest: Online On-Campus

Education

Current Educational Status:

- I am currently a high school student
- I will be a first time college student
- I am currently attending a different college/university
- I am a college graduate

I have attended interpreter preparation/education:

- Yes No Currently enrolled Am a graduate

Name of program: _____ Year graduated: _____

ASL Education & Experience

NOTE: The UNC ASLEI BA program begins at ASL V. Therefore, an ASL screening is required to determine readiness and placement in the program. There is a \$175 fee to complete the screening. You will be notified by the ASLEI program of your scheduled screening dates along with instructions on how to register. National credentialed applicants are waived from the ASL screening.

NOTE: If an applicant is not ready to enter the program at ASL V, the degree will require more than 4 years to complete.

I have completed (check all that apply):

High School ASL

If applicable, please list number of years: _____ and name of high school: _____

College ASL I

College ASL II

College ASL III

College ASL IV

College ASL V

College ASL VI

I have ASL competency by way of life experience

I have national interpreting credentials (i.e. RID or EIPA 4.0+ and written)

If applicable, please list and attach copy of national credentials: _____

Other (EIPA less than 4.0 Attach copy of EIPA) _____

Please list: _____

References

Please list two academic or ASL references.

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Overview of the Demonstration of Competencies Screening

The Demonstration of Competencies (DOC) has a fee of \$175 and is given during a weeklong session online. It consists of the following components:

- x ASL Expressive
- x ASL Receptive
- x Knowledge of Deaf Culture & Grammar
- x Written English
- x 6 SRNHQ (QJOLVK)

Once your application is reviewed, you will receive an email with further information about the dates of your screening along with important details. When the month of screening comes, you will be sent registration information to follow hyperlinks in the document. Read more information about the \$6 / (, \$)

KWWSV ZZZ XQFR HGX FHEV DVO LQWHUSUHWLQJ DFDGHPLF SURJUDPV DV

Disclaimer and Signature

By my signature on the ASLEI application, I attest all of the information contained herein is true and complete to