FORM B

In order to process interpreter/transliterator extensions on time, **strict** adherence to the May 13 and June 3 date each year will be observed.

Minnesota Department of Education	Mary Cashman-Bakken State Specialist: D/HH Minnesota Department of Education 1500 Highway 36 West Roseville, MN 55113-4266	Deaf and Hard of Hearing Education Interpreter/Transliterator Request for Extension-Form B

GENERAL INFORMATION AND INSTRUCTIONS: Those requesting an extension are required to contact four (4) individuals for letters of support. The request for letters of support is to provide insights about the interpreter's work. Once this form is completed, send it directly to the Minnesota Department of Education: Deaf and Hard of Hearing. Upon final review, the Educational Interpreter will be notified by the Commissioner of the Minnesota Department of Education (MDE). You can attach your letters to this form.

A EDUCATIONAL INTERPRETER/TRANSLITERATOR NAME:

B PLEASE CHECK ONE

- ☐ Mentor with whom the Interpreter has worked.
- ☐ Parent of a pupil the interpreter has served.
- ☐ Special Education Director of the district in which the interpreter is employed.
- ☐ Deaf and Hard of Hearing Services.

C YOUR NAME

Name:

Address/State/Zip:

Home Phone/E-mail address:

Work Phone:

D EXTENSION ☐ Yes, support extension ☐ Do not support extension

1) Do you feel an extension of the provisional certificate to be justified?

2) What kind of supports do you think this person needs in order to achieve certification?

Things to consider:

- The person's formal education.
- Training.
- Experience.
- Your personal interactions.

Signature Date

Mail to: Minnesota Department of Education
Mary Cashman-Bakken
State Specialist: D/HH
1500 Highway 36 West
Roseville, MNB 55113-4266

For more clarification e-mail: mary.cashman-bakken@state.mn.us