

DODHH Criteria for Raters for QA Interpreter Evaluation

At this time, we are looking for an additional 8 hearing raters to attend training October 16-18. We are pleased to share that we have had plenty of Deaf applicants.

Each rater shall possess an Associate's degree, preferably a Bachelor's degree; and hold national credentials; with a minimum of 5 years interpreting experience. Michigan residency is required. Must have knowledge of linguistics, sign language theory, and interpreting; and must be able to effectively work in teams.

Rater Responsibilities:

- Evaluate the expressive and receptive skills of interpreter candidates who take the QA I, QA II, or QA III performance tests by utilizing the prescribed subjective and objective scoring methodology established by the test development experts;
- Attend ALL mandatory training sessions prior to participating in rater scoring sessions;
- Shall consistently score within an acceptable standard deviation range to ensure a high level of inter-rater reliability; and
- Shall contribute effective dialogue as a rater team member in the process of scoring each candidate.

The rater process involves scoring a candidate's performance to assess their proficiency in the following areas:

- Spoken English-to-ASL;
- Spoken English-to-Signed English;
- ASL-to-Spoken English;
- Signed English-to-Spoken English;
- Written English-to-ASL (Sight Translation)

Candidates shall submit the below information by October 1, 2009:

- Application;
- Current resume or preferably vitae;
- Two letters of reference: one from an employer, or nationally certified interpreter in good standing and one which must be from a Deaf consumer;
- A five minute signed video recording introducing self, including information as to how you will meet the qualifications required, and reasons for your interest and/or desire to serve as a rater.

Rater services are provided solely in Lansing, Michigan at the DODHH office. As compensation, raters will receive mileage, parking, lunch, and payment for professional services.

DISCLAIMER: Minority persons are encouraged to apply. If you are currently serving in a paid position where you evaluate interpreters for hiring, testing, or graduation requirements; please do NOT apply. We would like to avoid all perceived and real conflicts of interest. Those teaching only ASL and Deaf Culture classes may still apply.

DODHH Application for Raters for QA Interpreter Evaluation

Please complete the below application and attach it to your corresponding documentation.

I. Identification Information

Legal Name:	E-mail:
Mailing Address:	Home Phone:
	Business Phone:
	VP Number:
Cell Phone:	TYT Number:
Are you a resident of the State of Michigan?	YES or NO

II. Employment Information

Primary Employer's Name:	E-mail:
Business Mailing Address:	TYT Number:
	Business Phone:
	VP Number:

Secondary Employer's Name:	E-mail:
Business Mailing Address:	TYT Number:
	Business Phone:
	VP Number:

III. Background Education Information*

College/University Name:	Business Phone:
College/University Address:	Graduation Date:
	GPA:
Area of focus/specialization:	Degree earned:

Additional College/University Name:	Business Phone:
College/University Address:	Graduation Date:
	GPA:
Area of focus/specialization:	Degree earned:

*Be sure to include copies of ALL unofficial transcripts from these institutions.

IV. Experience

How many years have you been interpreting?	
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What coursework or workshops have you taken related to linguistic features of ASL and English, sign language theory, and general knowledge of interpreting? Please list them in the adjacent box.	
Describe your ability to work in teams.	

V. Credentials

What national credentials do you have?	
How long have you held these?	

VI. Conflicts of Interest

Are you currently serving in a paid position where you evaluate interpreters for hire, in testing, or as part of graduation requirements?	YES or NO
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VII. Signature

By my signature below, I attest to having answered all of the above information and questions to the best of my knowledge. Also, by signing, I have full confidence that none of my current roles would negatively impact the State of Michigan QA Interpreter Evaluation process. Lastly, my signature confirms that if my roles would change, I would notify the DODHH office immediately.

With your application, due by October 1, 2009, please include the following:

- Current resume or preferably vitae;
- Two letters of reference from a deaf consumer, an employer, or nationally certified interpreter in good standing;
- A five minute signed video recording introducing self, including information as to how you will meet the qualifications required, and reasons for your interest and/or desire to serve as a rater.

Your application, resume/vitae, and letters of reference may be faxed attention to Sheryl Emery at 517-335-7773. The video should be mailed to 201 N. Washington Sq. Suite 150 Lansing, MI 48913. **Materials will not be returned.**

The Department of Energy, Labor & Economic Growth-Michigan Commission on Disability Concerns-Division on Deaf and Hard of Hearing is an equal opportunity employer.