



Western Oregon  
UNIVERSITY

**Interpreting Studies: Professional Practice  
Certificate Contract**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
V-number \_\_\_\_\_  
Email address: \_\_\_\_\_  
Phone: \_\_\_\_\_  Cell  Home  Work Advisor: \_\_\_\_\_

| CORE COURSES - |   | Term | Grade | Done | ToDo |
|----------------|---|------|-------|------|------|
| INT 610        | Internship & Portfolio  |      |       |      | 3    |
| INT 615        | Communication for Interpreters  |      |       |      | 3    |
| INT 618        | Ethics and Professional Practice  |      |       |      | 3    |
| INT 625        | Becoming a Practice Profession: The History of Interpreting and Interpreter Education |      |       |      | 3    |
| INT 630        | Communication in a Practice Profession  |      |       |      | 3    |
| INT 677        | Intrapersonal Aspects of Interpreting   |      |       |      | 3    |

**TOTAL QUARTER HOURS 18**

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* For Graduate Office Use Only \*\*\*\*\*

**APPROVED: Director of Graduate Programs**  
\_\_\_\_\_

**Date:** \_\_\_\_\_

COMPLETION DATE: \_\_\_\_\_