



Interpreter Affidavit

Customer's Name: _____

Customer's DL#: _____

Examiner's Name: _____

Interpreter's Name: _____

Interpreter's Identification: _____

Language Interpreted: _____

Type of Exam(s) being interpreted: _____

Date of Exam being interpreted: _____ Office Number: _____

I swear that I will act as the interpreter for this examination and provide a true and accurate interpretation of the examination questions and the answers provided by the customer.

- ☐ I am at least 18 years of age.
- ☐ I will not provide answers, coach, or assist the person taking the examination in any way.
- ☐ I understand that coaching or supplying answers will result in the termination of the examination.
- ☐ I also understand that coaching or supplying answers will prevent me from interpreting in any examination office in the future.

Interpreter's Signature

Examiner's Signature

Note: This signed form must be scanned as part of the customer's application.