



ITI Qualified Membership – Referee’s Questionnaire Conference Interpreting Reference

Candidate’s Name: _____

PLEASE USE BLOCK CAPITALS. Return ORIGINAL of completed form to ITI at the address below.

Surname: First name: Last meeting at which I worked with the candidate:- Place: Date: Subject: Languages:	I hereby vouch for the following language combination:			Signature: Professional qualifications (MITI/MCIL/AIIC etc): Date:
	A	B	C	
	My combination is:			
	A	B	C	

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REQUIREMENTS FOR QUALIFIED MEMBERSHIP

- 1. A first degree or postgraduate qualification in a relevant subject or a corresponding qualification accepted by ITI**
- 2. Recommendations regarding ability and good repute**
- 3. Recent professional experience:** A minimum of 200 days over a period of five years plus a successful Assessment Interview; alternatively, a minimum of 120 days over a period of three years plus a Pass in the ITI Membership Examination, and/or successful Assessment Interview.