



**Aging and Disability Services Division
Interpreter/CART Registry
3416 Goni Rd., Suite D-132
Carson City, NV 89706**

Form A 2 – CART Application

**Phone: 775-687-4210
Fax: 775-687-0576
Email: jabalderson@adsd.nv.gov**

Section A Application Procedures/Checklist:

- Current Photo (Passport size)
- Photocopy of current picture identification with date of birth (e.g. Driver's License)
- Completed Application (Requires Notary)
- Signed, completed Code of Professional Conduct form (Requires Notary)
- Photocopy of current certifications

Section B Registration Category:

- € Initial Application
- € Registration Renewal
- € Registration Update
- € Registration Reinstatement

Each level of certification requires graduation from High School or completion of the GED:

€ I am a high school graduate (Attach documentation) Year graduated: _____

Name and location of High School: _____

€ I have completed and passed the GED (Attach documentation)

Year GED passed and name and address of issuing Institution: _____

€ Neither apply; I have attached an explanation page.

I am registering for the following category and hold the following certifications:

Certified CART Provider: (Check all that apply)

- € Certified Court Reporters Board of Nevada; or
- € Registered Professional Reporter; or
- € Certified CART Provider; or
- € Certified Broadcast Captioner; or
- € National Court Reporter's Association as a Certified Real-time Reporter; or
- € Certification from any other state licensing board with a minimum of 200 words per minute or higher skills assessment

○ Name of state if licensed with another state: _____

Section C Applicant information:

Full, Legal name of applicant	
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(Include Alias or other names in parenthesis)		
Address where you can be reached		
City	State	Zip Code
Home Phone	Cell Phone	Work or other phone
Email		

Please indicate the contact information you want on the registry: (Name and certification information is mandatory):

Additional Questions

1. ____Yes ____No Have there been any substantiated allegations of a code of ethics violation(s) pertaining to CART practice by any certifying body?

2. ____Yes ____No Has there been any adverse verdict as a result of any civil suit regarding your professional malpractice?

3. ____Yes ____No Have you ever had a CART credential denied, revoked, or suspended within the past ten years?

4. ____Yes ____No Are there any pending actions related to a denial, revocation, or suspension of any CART credential?

5. ____ Yes* ____ No

Have you been convicted of a crime under any laws within the past ten years?

*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

6. ____ Yes* ____ No

Are any criminal charges currently pending against you?

*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

7. ____ Yes ____ No

Is there any condition which would prevent you from providing CART service?

Section D Certification of Applicant:

Certification

I hereby agree and have knowledge of and comply with the standards set forth in Nevada Revised Statute 656A governing the provision of Interpreting and CART Services and understand the types of misconduct for which disciplinary action may be initiated against me pursuant to these regulations.

I hereby certify that the preceding information is correct to the best of my knowledge. I agree to abide by and follow the NAD-RID Code of Professional Conduct as set forth in section 40 (1)(e) of Nevada Revised Statute 656A.

Signature

Date

State of _____

County of _____

On the _____ day of _____ 20____, before me, the undersigned, a Notary Public in and for the
county and state aforesaid, personally appeared _____, known to me to be the person named
above and who executed the foregoing instrument, and he/she acknowledged to me that he/she executed the same freely and
voluntarily.

BY: _____

Notary

Affix Notary Seal