

Scheduling a Written Exam

Step-by-step guides on how to schedule a test are found by clicking on the test you want to take (underlined text on items 1, 2). Make sure you read the [registration policies](#) before scheduling a test.

[Schedule My Test Appointment](#)

1. Make sure you read and understand the registration policies. Once you're ready, click on [Schedule My Test Appointment](#).

Test Registration

Select Written Test Location

Select Written Test Location
[Select Written Test Location](#)
 Interpreter Written Test in Olympia: 10:00am
 Document Translator Test in Olympia: 10:00am
 Interpreter Written Test in Olympia: 2:00pm
 Document Translator Test in Olympia: 2:00pm
 Interpreter Written Test in Yakima: 2:00pm
 Document Translator Test in Yakima: 2:00pm
 Interpreter Written Test in Spokane: 2:00pm
 Document Translator Test in Spokane: 2:00pm

Test Registration

Select Written Test Location

Interpreter Written Test in Olympia: 10:00am

Written Test Location Registration

Interpreter Written Test in Olympia: 10:00am Date(s)

Select either medical interpreter or social service interpreter. (You do not need to take the written test if you passed it before. Dates in gray are full. More dates will show in blue when they are open.)

Wed, 9/10/2014
 Wed, 10/15/2014
 Tue, 11/4/2014 (42 of 50 available)

2. Select your preferred location and time from the top drop-down menu. It will then prompt you to select your **date**. **Dates hyperlinked in blue have available slots, as indicated in parenthesis. Dates in black, are full. If all dates are full, please wait until the first week of next month when new schedules are published.**

Selected Written Test Location

Location Please see your test location below
Written Test Location Interpreter Written Test in Olympia: 10:00am
Date Tuesday, November 4, 2014
Start Time 10:00am

3. Ensure that you have chosen your desired date, time, and location (top of screen).

* Last Name

* First Name

* Last 4 Digits of Soc. Security #

* Address

* City

* State

* Zip Code

* County

* Best Phone (include area code)

Cell Phone (include area code)

* E-mail (your e-mail address)

E-mail Okay (Recommended) Yes No

* Your Language (select one) Select your language here

* Type of Test (select one) **DO NOT leave as DSHS Employee! Choose between Medical or Social Service Interpreter**

* Test Location (select one) The location has to match you original location selection

Special Instructions

E-mail Confirmation and Reminders
 Confirmation and reminder e-mails for this appointment will be sent to (separate address)

4. Fill in the prompted information. Please make sure to follow the advice written in the pictures.

5. Click *Continue* to make a payment.

To ensure that you receive the right test, your appointment confirmation, and your test results, **it is your responsibility** to enter the following information accurately: mailing and email address, language, test location, and type of test. Please do not select DSHS Employee.