Illinois Deaf and Hard of Hearing Commission

Board for Evaluation of Interpreters (BEI)
Replacement of Certification Card

Applicant Information

Name:	Maiden/Previous Name:		IL BEI Certification #:	
Street address:	City:	State:	ZIP code:	County:
Daytime phone number:	Email address:			

Type of Replacement Certification

Select one:

- ☐ Original certification was lost/destroyed
- ☐ Name change

For Name Change

Enclosed is one of the following:

- ☐ Copy of Marriage Certificate
- ☐ Copy of Divorce Decree
- ☐ Copy of Court Order

Replacement Card Fee

Include a $15 fee if requesting a new IL BEI certification card to be issued.

Note: A fee is NOT required if you are only changing your name and do not wish to have a new card printed. All other requests must include the $15 NON-REFUNDABLE fee with this form.
All correspondence will be sent via email unless applicant requests otherwise.

Submittal Instructions

1. Complete and sign the form.
2. If a name change, attach the appropriate verification.
3. If requesting a new card, send payment either by
   a. Enclosing a check or money order payable to IDHHC): or
   b. Make an electronic payment via E-Pay at https://www.epayillinois.com/Home/ShowSiteLandingPage/6497.

Mail, email, or fax to: **IDHHC**
528 South 5th Street, Suite 209
Springfield, Illinois 62701
FAX: 217-557-4492
Dhh.interpreter@illinois.gov

Signature

I attest that all information provided in this application is accurate and true and agree to abide by the IL BEI Manual or the Illinois Interpreter for the Deaf Licensure Act of 2007 which requires anyone providing interpreting services to have a license. (Certification is not a license to practice interpreting.) I understand that my certificate is subject to suspension, revocation, or cancellation.

Applicant's signature: **X** _____ Date: _____

This application is incomplete without the applicant's signature.

***I UNDERSTAND THAT ALL FEES ARE NON-REFUNDABLE*.** My signature above authorizes the Illinois Deaf and Hard of Hearing Commission to reduce the amount of this check if the amount submitted is not correct. I understand this will be done only if the amount submitted is greater than the required fee hereunder, but in no event shall such reduction be made in an amount greater than $50.