



**State of Missouri**  
**Missouri Commission for the Deaf and Hard of Hearing**  
 3216 Emerald Lane, Suite B, Jefferson City, MO 65109  
 (573) 355-5989



## RENEWAL OF CERTIFICATION APPLICATION

**PURPOSE OF FORM:** This form is used by interpreters who are certified in the Missouri Interpreters Certification System (MICS) to verify that they have met their annual CEU requirements and to apply for renewal of their certification.

### I. APPLICANT INFORMATION:

Name *(Print in full, including middle initial)*:

Address:

Email:

Phone Number:

IF ANY INFORMATION HAS **CHANGED**, PLEASE **INCLUDE** A CHANGE OF INFORMATION FORM WITH YOUR RENEWAL.

Setting(s) I predominantly interpret in are:    Medical    Mental Health    Legal    VRS  
 Performing Arts    Business    Freelance    Education (Pre K-12)    Education (Post-Secondary)

### II. CERTIFICATION INFORMATION:

|  |                    |
|--|--------------------|
| DID YOU BECOME CERTIFIED FOR THE <u>FIRST TIME</u> STARTING November 2025 – October 2026? <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, when? _____ | TOTAL CEUs EARNED: |
|--|--------------------|

|   |                     |
|---|---------------------|
| If yes, please refer to the prorated CEU chart that was sent with your certification documents. | ETHICS CEUs EARNED: |
|---|---------------------|

### III. CERTIFICATION FORMAT:

Interpreters completing their renewal will receive a digital copy of their certification. MCDHH can also mail you a wallet-sized durable copy for your convenience. If you would like a copy mailed to you, please indicate below.  
 Yes, I would like a wallet-sized copy.

### IV. AFFIDAVIT OF APPLICANT:

I, the above-named applicant, being first duly sworn upon my oath, state as follows:  
 I have personally completed the foregoing application truthfully and without omission; The information and answers contained in the foregoing application and any attachments thereto are true to the best of my knowledge and belief; I will not intentionally divulge confidential information relating to the certification process, including content, topic, vocabulary, skills and/or any other testing material; I will comply with state laws, rules and regulations of the Board of Certification of Interpreters and I will make this affidavit knowingly, and any false statement or material omission herein subjects me to criminal penalties under section 575.050 RSMo.

|                      |       |
|----------------------|-------|
| Applicant Signature: | Date: |
|----------------------|-------|

### V. INSTRUCTIONS:

Renewal fee of \$15 must be paid online at the MCDHH website: <https://magic.collectorsolutions.com/magic-ui/en-US/Login/mo-elem-secondary-education>. Submit the completed form, receipt payment, and a photocopy of a valid driver's license or state issued ID to MCDHH, Attn: MICS Coordinator, at the address listed at the top of this form.

**Attach copies of the certificates verifying that you have met the 2.0 total CEU requirements, including 0.3 CEUs in ethics, as detailed in 5 CSR 100-200.130.**

**NO PERSONAL CHECKS, CASHIER'S CHECKS, AND MONEY ORDERS WILL BE ACCEPTED.**

### FOR OFFICE USE ONLY:

|                |                      |           |              |
|----------------|----------------------|-----------|--------------|
| Date Received: | Confirmation Number: | Fee Paid: | Received By: |
|----------------|----------------------|-----------|--------------|

|      |                    |                     |
|------|--------------------|---------------------|
| 2026 | Total CEUs Earned: | Ethics CEUs Earned: |
|------|--------------------|---------------------|