

PINRA: Participant Initiated Non-RID Activity

Basic Information

Participants may wish to attend professional development opportunities offered by organizations that are not involved with interpreting and are unlikely to be RID Sponsors. If a conference or workshop is not co-sponsored by an RID Approved Sponsor, the participant may apply to a Sponsor (such as DHCC) for CEUs for that event. For example, a school district is hosting a workshop on bilingual/bicultural education for Deaf students, but are not offering CEUs at the event. A participant can apply to an RID Sponsor (DHCC) and earn CEUs for attending the workshop.

What do I need to do BEFORE the activity?

YOU MUST CONTACT DHCC BEFORE SUBMITTING ANY PAPERWORK. Once the activity has been approved by DHCC and you have all the details of the activity, the following two items must be sent to DHCC **at least 2 weeks before the event**:

1. **The Participant Initiated Non-RID Activities Form** (completed down to the double dashed line)
2. **A Formal Activity Description** (e.g. a flyer or advertisement for the event). This activity description must document the event content and the number of hours/days the event will last so DHCC can determine the appropriate number of CEUs and the content area.
3. A **check for \$20**. This fee is reduced to \$15 for those individuals who are DHCC Members. If you are interested in becoming a member, the membership fee is \$20/year (January - December), and the appropriate form is included in this packet. The payment for PINRAs must be submitted with the initial paperwork.

Once all three items have been received, DHCC will approve the activity and notify the participant of the approval, or request additional information.

What do I need to do DURING the activity?

After you have submitted the above items to DHCC and the event has been approved, you will need to obtain some kind of proof of attendance at the event. This can be a copy of a certificate of completion, or you may have the event coordinator complete the **DHCC CEU Attendance Form** (attached), or both. It is also very beneficial to collect any additional paperwork such as copies of registration, an agenda or handouts given at the event.

What do I need to do AFTER the activity?

After you have completed the activity, you will need to submit **proof of attendance** (described in the previous section) and any additional paperwork (e.g. handouts, agenda etc.) to DHCC within **30 days after the event**.

After all paperwork and payment has been received, DHCC will submit your information to RID and the appropriate number of CEUs will be credited toward your transcript.



Participant Initiated Non-RID Activities (PINRA)

This form will be used if a CMP Participant plans to attend another organization's workshop, conference, formal in-service training or activity. The RID Approved Sponsor will determine if the activity is appropriate for CEUs.

Before the start of the activity/conference, this section should be filled out and signed by both the participant and RID Approved Sponsor:

Participant Name: _____ RID Member #: _____

Participant Address _____

Email: _____ Phone # _____

Activity/Conference Name: _____

Activity/Conference Theme or Focus (attach brochure/flyer) _____

Date and Times of activities you will attend: _____

Total number of CEUs to be awarded: _____ Circle content area: Professional Studies General Studies

I certify that this activity/conference represents a valid and verifiable Continuing Education Experience that exceeds routine employment responsibilities.

Participant Signature: _____ Date: _____

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Name and Code of RID Approved Sponsor _____

I certify that I received this activity plan prior to the start of the activity/conference and I agree to sponsor this Continuing Education Experience. I will verify successful completion prior to awarding CEUs.

RID Sponsor Administrator Name: _____ Signature: _____

RID Sponsor Code: _____ Date: _____

<p>This section should be filled out and signed upon <u>completion</u> of the activity/conference:</p> <p>Activity Code Number _____ CEUs Awarded: _____</p> <p>I have verified that the participant attended this activity/conference and that the activities listed are appropriate educational experiences which should be awarded the number of CEUs denoted above.</p> <p>RID Approved Sponsor Signature Administrator: _____ Date: _____</p>

The Participant must send documentation of attendance to the Sponsor upon completion of the activity. The Sponsor must file this form with RID online at www.rid.org within 45 days of the completion of the activity/conference.

DHCC CEU Rate Sheet

Basic Information

The following is a list of rates for each type of CEU submitted. Fees include the cost of consultative discussions regarding the initial request and the administrative work involved between RID, DHCC and the individuals and organizations involved.

An additional \$20 fee will be charged for activities that must be submitted by calendar year end and are received by DHCC's CMP Coordinator after December 15th of that year.

To become a DHCC Member, simply fill out the attached membership form. Membership runs from January 1 - December 31.

CEU Rates

Activity Type	DHCC Member Rate	Non-Member Rate
Academic Coursework	\$15	\$20
Participant Initiated Non-RID Activity (PINRA)	\$15	\$20
Independent Study	\$40	\$50
Sponsor Initiated Event (Presenters)	\$65	\$75

Professional or General Studies?

Where does my activity fall?

Introduction

All RID CEU activities are labeled as either Professional Studies or General Studies. RID requires participants earn a minimum of 8.0 CEUs during each 4-year certification cycle. A minimum of 6.0 CEUs must be completed in Professional Studies during each Certification Maintenance Cycle. For General Studies, there is no minimum requirement of CEUs in this category, however only 2.0 of the 8.0 CEUs required will be counted toward certification maintenance. All CEU categorizations are at the discretion of the Sponsor (DHCC), who adheres to the RID guidelines.

Professional Studies

Professional Studies contain content that DIRECTLY affects the field of interpreting/transliterating. Examples of Professional Studies topics include, but are not limited to:

1. **Linguistic and Cultural Studies:** The study of any language or linguistic system, as well as general cultural studies, and the study of any specific culture. Examples include:
 - Advanced English vocabulary and grammar development
 - Linguistics of ASL
 - Linguistics of English
 - Language variation
 - Sociolinguistics
 - Deaf culture
 - American culture
 - Minority group dynamics
 - Cross-cultural studies
 - Multi-cultural studies
2. **Theoretical and Experiential Studies:** The process of interpreting/transliterating through the application of systems of principles, philosophy, ideas or concepts. Examples include:
 - History and issues in interpretation and transliteration
 - Theory of interpretation and transliteration
 - Skills development in interpretation and/or transliteration
 - Skills development in consecutive and simultaneous interpretation
 - Professional ethics

3. **Specialization Studies:** Building skills in more narrowly focused areas within the broader field of interpreting or transliterating. **Documentation must be present detailing the way in which the activity relates to the development of interpreting skills in that particular field or setting.**

Examples include aspects of:

- Educational settings
- Rehabilitation settings
- Legal settings
- Medical or mental health settings
- Substance abuse recovery programs
- Technical areas
- Ethics as applied in specialized settings

General Studies

General studies include topics that enhance the interpreter/transliterators' general knowledge base.



Attendance Verification Form for CEUs

Date: _____

This form verifies that _____
(interpreter name)

attended the following event: _____
(event name)

at: _____
(location)

on:

Date	Start Time	End Time	Total Breaks	Total hours eligible for CEUs (total time minus breaks)

Presenter or Facilitator Information:

Name: _____

Contact Information: _____

Signature: _____ Date: _____

***If possible, interpreters should provide additional proof of attendance such as an agenda, handout or certificate of completion from the event.

All information should be submitted to Sarah Reed by mail at DHCC, 630 Fairview Rd, Suite 100, Swarthmore PA 19081, by email at sarahr@dhcc.org, or by fax at 610-604-0456. If you have questions, contact Sarah at 610-604-0450.***

2013 Membership Form

Deaf-Hearing Communication Centre, Inc.



630 Fairview Road, Suite 100 | Swarthmore, PA 19081 | [610] 604-0450 v/tty | [610] 604-0456 fax | info@dhcc.org

Membership Runs from January 1 - December 31

DHCC Membership Benefits Include:

- ◆ Notification of all DHCC Events and Activities
- ◆ Discounts on ASL Classes, CEU fees, Workshops and Events
- ◆ E-subscription to DHCC's Quarterly Newsletter, *The Communicator*
- ◆ Eligibility for the Arlene Long Memorial Education Fund Program for ASL Teachers and Interpreters
- ◆ Eligibility to participate in the Community Interpreting Program

DHCC accepts checks (payable to DHCC), MasterCard or Visa. Please complete and detach the form below and send with your payment to:

Deaf-Hearing Communication Centre
DHCC Membership
630 Fairview Rd, Suite 100
Swarthmore, PA 19081

Yes, I would like to become a DHCC Member and support the programs, activities, and services that DHCC provides to the Deaf, hard of hearing, and hearing communities. Please accept my tax-deductible contribution of:

- | | |
|--|---|
| <input type="checkbox"/> \$20 Individual Membership | <input type="checkbox"/> \$75 Organization Membership |
| <input type="checkbox"/> \$30 Family Membership (Same household) | <input type="checkbox"/> \$250-\$475 Patron's Circle |
| <input type="checkbox"/> \$50-\$225 Friends Circle | <input type="checkbox"/> \$500 or more Select Circle |

Name: _____

Address: _____

Phone: _____ Email (needed for The Communicator): _____

Please Select Payment Method:

Check Enclosed for \$ _____.

Please charge my credit card the following amount \$ _____

Check one: Visa MasterCard

Card Number: _____

Exp. Date: _____

Name on Card: _____

Card Holder's Ph #: _____

Signature of Card Holder: _____

Date: _____