



# ADMISSION & FULL TUITION WAIVER APPLICATION

Summer 2026, Remote Synchronous (live, online)

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## About the Class

Bridging the Gap is a 40-hour professional development program that prepares bilingual individuals to work as medical interpreters. It is used to train novice and experienced medical interpreters, and it is accepted by both accredited national certifying bodies, the Certification Commission for Healthcare Interpreters (CCHI) and the National Board of Certification for Medical Interpreters (NBCMI). Additionally, Horizon Language Services provides language coaching, thus surpassing 40 hours of training. No interpreting experience is required in order to take the class.

This course offering by Horizon Language Services covers:

- **Basic interpreting skills.** Roles, ethics, conduit and clarifier interpreting, managing the flow of the session.
- **Codes of ethics.** Codes of ethics and decision-making for interpreters in health care.
- **Integrated medical terminology, anatomy, and physiology.** Introduction to common terms, procedures, and specialties relating to human physiology and health.
- **Information on health care systems.** Introduction to the health care systems and types of healthcare providers.
- **Culture in interpreting.** Self-awareness, basic characteristics of specific cultures, traditional health care in specific communities, culture brokering.
- **Communication skills for advocacy.** Listening skills, communication styles, how doctors think, appropriate advocacy.
- **Professional development.** Effective communication, professional conduct, self-care, resources for professional growth.
- **Language coaching.** Interactive, guided interpreting exercises.

## Materials included

- Course textbook
- Bilingual medical glossary if available in your target language (if not available participants will receive an English-English glossary)
- *The Guide to Common Medications*
- A signed Certificate of Successful Completion, if applicable.

## Schedule: Training Dates & Times

### Saturdays and Sundays

June 13th, 2026 through July 25th, 2026  
(except 4th of July weekend);

PST: 9:00 a.m. - 3:00 p.m.

MST: 10:00 a.m. to 4:00 p.m.

CST: 11:00 a.m. to 5:00 p.m.

EST: 12:00 p.m. to 6:00 p.m.

Students must attend all hours of the training. Students will get at least three breaks.



**June**

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

**July**

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

**Location:** **Video conferencing platform: Google Meet** (no Google account required)  
 Additionally, due to the remote nature of this class, students will have access to some materials through a designated website (more details provided in class).

### Admission Requirements

**Minimum age and education:**

Participants must be 18 or older and have a high school degree or the equivalent. Proof of high school graduation or GED, etc. is required.

**Proof of language proficiency:**

Participants must be bilingual in English and at least one other language, and proof of proficiency in both languages is required to enroll in the class. Proof of proficiency can be **copies of any one of the following documents:**

- High school diploma or equivalent, or university/college degree from a school using the assessed language(s).
- State or federal court interpreter certification.
- Oral language exam results with scores equivalent to ACTFL Advanced Mid-level or ILR Level 2.

If an applicant does not have any prior proof of language proficiency, an assessment must be completed before admission into the program. Registration and scheduling is facilitated by HLS:

- For all spoken languages, a speaking and listening assessment will be completed for a fee of \$85, per assessment. It will be administered by ALTA Language Services over video communication, on a weekday at a time that is convenient for the applicant. Once scheduled, the applicant will receive instructions to complete the assessment, which is approximately 20-25 minutes long. The maximum possible score is 12; a 9 or higher is required for admission.



- For American Sign Language, scheduling and scoring of the test can take up to six (6) weeks, thus any ASL speaking candidate applicant must begin the application early and be ready to take the test no later than seven weeks prior to the beginning of class.

### **Tuition Waiver Application Requirement: Short Essay**

Applicants are required to submit a short essay (no more than five pages long) that includes the following information:

- Why are you the most deserving candidate?
- Why do you want to become a medical interpreter?
- Explain your financial challenge and why this opportunity is important to you.

## **Application Procedure & Deadlines**

**Please submit your application form and documents one of two ways:**

1. By filling out this [form](#), OR
2. By emailing pages 6 & 7 of this application packet to [contact@horizonlanguageservices.com](mailto:contact@horizonlanguageservices.com)

**Include all required documentation along with your application:**

- Completed application form (if sending via email)
- Copy of high school diploma, GED certificate, or university/college degree (if available);
- Proof of language proficiency (if available)
- Proof of U.S. residency (e.g. driver's license, utility bill). *U.S. citizenship or proof of immigration status is not required.*
- Short essay
- Optional: Letter(s) of recommendation

### **Deadlines**

1. Submission and updates to your application can be made until **Friday, March 20th, 2026**. All applicants will be notified between **Monday, March 23th and Tuesday, March 31th 2026**.
2. If an assessment of spoken language is needed, payment of \$85 per test and scheduling must be made **within four (4) days of email notification**. Otherwise, tuition waiver will be forfeited and awarded to the next best candidate. Instructions for this assessment will be provided in the email notification, if needed.



## Language Coaching

In addition to the 40-hour BTG curriculum, the training by HLS includes time reserved for interactive, in-class, practice opportunities. Whenever possible, HLS also engages experienced language coaches for each attendee's specific language pair(s).

## Assessments Through TestInvite

Some class assessments are administered through a secure online testing platform called TestInvite. These assessments are specific to this class and are separate from any language proficiency evaluations you may have completed with other organizations as part of the admissions process.

HLS may share limited information, such as your name and email address, with TestInvite solely for the purpose of setting up and managing your participation in these assessments.

By completing your application and enrolling in the program, you are providing implicit consent for HLS to share and process the necessary information as described above.

## Certificates of Successful Completion

A Pre-Test and a Final Test will be given to measure participants' improvement before and after the training. **Digital certificates of successful completion will be awarded to participants who score 70% or better on the Final Test.** Participants will be notified via email about their test results within one month of completing the course. Certificates will be emailed within two months after the training.

Participants who do not pass the Final Test are permitted one retake within a 3-month period. If a participant does not pass the Final Test after the permitted re-take, CCHCP will not issue a certificate of successful completion.

**Students must attend all hours of the training and pass the Final Test to earn a certificate of successful completion.** This certificate serves as proof that the holder is a trained medical interpreter, and can be used to meet the proof of training requirement for national certification and other bodies. In order to become a nationally certified medical interpreter, participants who successfully complete the course should take and pass national certification exams through the National Board of Certification for Medical Interpreters ([www.certifiedmedicalinterpreters.org](http://www.certifiedmedicalinterpreters.org)) or the Certification Commission for Healthcare Interpreters ([www.cchicertification.org](http://www.cchicertification.org)). Some states may have their own state certification exams to be a state-certified medical interpreter.

If a physical certificate is needed or if it needs to be reissued due to loss, damage, or any other reason, payment of a fee and shipping will be required in order to process the request.



## Stipulations and Terms

Tuition waiver is contingent upon sufficient student enrollment. If, after granting the waiver, there are not enough students enrolled to run the class, the term will be cancelled, and the waiver will be deferred to the next available term.

The recipient is awarded financial assistance in the form of fees waived as described above. No funds will be transferred nor disbursed to any individual.

HLS reserves the right to remove any participant who interferes with or causes disruption in the learning environment. Refunds will not be issued to participants who are removed.

## Additional Information

Prior to the beginning of class, all our communication will be primarily by email so please make sure your email address is working and check it regularly.

If you have any questions please send an email to [contact@horizonlanguageservices.com](mailto:contact@horizonlanguageservices.com).

If you have not heard back within a reasonable amount of time, please call 678-421-4021 and leave a voicemail if you get no answer.

**Please retain pages 1-6 for your records.**

**Do not send them with your completed registration form.**

**Please submit pages 7-8 together (even if page 8 is non applicable).**

If you are not selected for the tuition waiver this term,  
you are welcome to reapply in a future session.



# ADMISSION & FULL TUITION WAIVER APPLICATION

## Summer 2026

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Please fill out and submit via email (both application pages 7 and 8)  
Or fill out the following online form [here](#).

**Dates**

Saturdays and Sundays  
June 13th through July 25th, 2026  
(except 4th of July weekend)

**Times**

9:00 a.m. to 3:00 p.m. PST  
10:00 a.m. to 4:00 p.m. MST  
11:00 a.m. to 5:00 p.m. CST  
12:00 p.m. to 6:00 p.m. EST

**Location**

Video conferencing platform: Google Meet

First name: \_\_\_\_\_ Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Primary phone #: \_\_\_\_\_ Secondary phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Primary Language: \_\_\_\_\_

Second Language: \_\_\_\_\_ Third Language, if any: \_\_\_\_\_

Pronouns (he, she, etc.): \_\_\_\_\_

Who referred you?/Where did you hear about HLS? \_\_\_\_\_

**Please note:**

All applicants will be notified of the result of their application between Monday, March 23rd and Tuesday, March 31st 2026.

If the tuition waiver is awarded to an individual who was not able to provide satisfactory proof of language proficiency, HLS will facilitate payment and scheduling of all necessary language proficiency assessments. The cost of this assessment is not covered by this tuition waiver (refer to Deadlines: page 4). Payment must be submitted and scheduling coordinated within four (4) days of email notification. If the awarded applicant fails to meet that deadline, the waiver will be forfeited and offered to the next best candidate.

If applicable, provide preferred day and time for language proficiency assessment (HLS will attempt to meet your preference but may be subject to availability):

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If needed, payment instruction will be provided upon results notification.



## APPLICATION FORM

### Summer 2026

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Please fill out and submit via email (both application pages 7 and 8)

Or fill out the following online form [here](#).

#### **Payer information:**

If any fees are needed and paid by someone other than yourself, such as family or a sponsoring organization, please fill out the following section. If not applicable please enter "**Myself**" for the Name of Payer and leave the rest blank.

Name of Sponsoring Organization: \_\_\_\_\_

Contact Name at Sponsoring Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_