

Bursary Application for Translation during the exam or for the Written exam	CTA Trainer examination
NAME	
I am a member of (TA national association):	
Address	
email	
Telephone	
Current certification or status: (PTSTA)	
Field (E,O,C,P)	
Date of Exam	
Name of Principal Supervisor	
Native Language	
Name of Translator	
Bank Account Information	
Name of the bank	
IBAN Number	
BIC- Bank Identification Code	
Signed by Candidate	
Signed by CTA Trainer Exam Coordinator	
Signed by COC member Cathy Mc Quaid admin@cathymcquaid.co.uk	