

SAN DIEGO SUPERIOR COURT

## SUPPLEMENTAL APPLICATION FORM

#### INTERMITTENT INTERPRETER – Tagalog Option

## Examination No. 13‑004

|  |
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| **LAST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SOCIAL SECURITY NUMBER:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

Before completing this supplemental application form, please be sure to review the job announcement in order to become familiar with the description of the job summary and requirements for competing in the examination process.

The information provided on this supplemental application form will be: (1) used to determine your eligibility to compete in the examination process, (2) evaluated in the examination process, and (3) provided for review during the selection process.

Complete this supplemental application form carefully and entirely. Wherever specific information has been requested, it MUST be stated. When completing this form, wherever lines are provided, state concisely the details of how you acquired the specific knowledge or skill, such as duties or experience or the course content of any education or training. If you need additional space, you may attach additional sheets, numbering them accordingly. (Be sure to print or type your name, social security number, and examination number on each additional sheet.)

Those sections which are not applicable to your particular qualifications should be marked "N/A" to indicate that they have not been overlooked. **Do NOT make statements such as "Refer to resume or application" to indicate your intended responses when completing this form.** **Incomplete or illegible forms may be the basis for disqualification, so please provide complete and legible information.**

If you have questions, please contact San Diego Superior Court Human Resources at (619) 450-7230.

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**San Diego Superior Court Supplemental Application Form**

**Intermittent Interpreter – Tagalog Option Exam # 13-004**

**SECTION I**

In the spaces below, please provide information about the certifications you possess as a Tagalog Interpreter. Include the certification issued by the Judicial Council of California **(required for this application)**, as well as any certifications from the Federal Courts, courts outside California, government departments or other agencies.

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| --- | --- | --- | --- |
| **Name of Certifying Body or Organization** | **Date of Certification**  (Month, Day & Year) | **Certification**  **Number** | **Purpose of**  **Certification** |
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**SECTION II**

Please provide the information requested below for any education you have completed that is related to interpreting services.

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| **Name and Address**  **of School** | **Description of**  **School**  (i.e., college, university, vocational, technical, training center, etc.) | **Type of**  **Degree or**  **Certificate**  **Awarded** | **Major**  **Subject**  **Studied** | **Length of**  **Program** |
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**Intermittent Interpreter – Tagalog Option Exam # 13-004**

**SECTION III**

Please describe any experience you may have providing interpreting services in a court environment by completing the following matrix.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Location**  **of Court** | **Dates of**  **Employment** | **Type of Court**  (i.e., state trial court, federal court, appeal court, etc.) | **Status**  (i.e., full-time, part-time, as needed, etc.) | **Types of Cases** |
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**SECTION IV**

Please provide the information requested below listing your work history as a Tagalog interpreter.

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| **Name of**  **Employer** | **Dates of**  **Employment** | **Description of**  **Work**  **Environment**  (i.e., school district, government agency or organization, corporation, etc.) | **Status**  (i.e., full-time, part-time, contract, etc.) | **Describe Nature**  **of Work**  **Performed**  (i.e., instructor, translate tapes, city council meetings, mediation, or administrative law hearings) |
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I certify that all of the information provided in my written responses in connection with this supplemental application form is true and accurate. I understand that falsified information may form the basis for my disqualification or dismissal.

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Applicant’s Signature Date

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