

## COLORADO SPRINGS POLICE DEPARTMENT ESPAÑOL SERVICE PROGRAM P.O. BOX 2169 COLORADO SPRINGS, CO 80901

## **APPLICATION**

Mr., Mrs, Miss, Ms. (Circle One)		DATE_	
NAME	First		Middle Initial
OTHER KNOWN NAMES (Include nicknam			
HOME ADDRESSSTREET			
STREET		CITY	ZIP
MAILING ADDRESS (IF DIFFERENT)	TREET	CITY	ZIP
HOME PHONE	BUSINESS PHONE_		
E-MAIL ADDRESS			
NAME/ADDRESS OF EMPLOYER			
SUPERVISOR'S NAME			
Previous Employment			
Employer/Organization	Position/Title or Duties		Dates To From
If available, attach your resume. Use the back	SALE Considerational arrows in		
		Recueu	D' 1 (Daniel
EDUCATION: Name of	Institution		Diploma/Degree
High School		_	
College			
Graduate School			
Prof/Tech Training			
Indicate hobbies, special skills or training	j.		

List Group and organizations in which you are a member:
List previous or present volunteer jobs and community organizations with which you are involved:
Indicate special field of study and/or experiences you have had in dealing with family or individual problems, needs, or crises:
Is Spanish your language of origin? [ ] Yes [ ] No If you learned Spanish in school, how many years of Spanish have you had? What grade did you receive? If you learned Spanish in school, have you had an immersion experience in the language? [ ] Yes [ ] No If yes, please describe how long ago, where and for how long and what you learned from the experience.
Other than Spanish, do you speak any other foreign languages? [ ] Yes [ ] No If yes, what language?
List any medical limitations that could affect the performance of your duties as a translator.
Explain why you would like to be an interpreter with the Colorado Springs Police Department.
What additional skills you would like to develop as an outcome of your experience with the program?

\ESP\Applica doc March 5, 2001

Are you willing to a Are you willing to a Will you commit to	commit to a one-year serve one 24-hr. day patke part inhow attend regularly the eduled in-service trai	per month? irs of pre-service trai ESP's monthly	ning?		•
REFERENCES:					
List two references	(do not include rela	tives): Give name, a	nddress, zi	p and phone.	
1Name	Address	City	Zip	Home Phone	Work Phone
2.					
Name	Address	City	Zip	Home Phone	Work Phone
NameRelationship	Zip	Hom	e Phone		Work Phone
Address	۷.۰۰ ا	110111	c i nonc		WORKTHORE
reference) on the su is equally applicable consideration giver qualification to wo	of Colorado Springs Intability of new persue to volunteers in that professionals. Also rk in certain units or	onnel due to the natu at voluntary staff is tr , the successful comp programs of the Depart	re and ser eated with oletion of artment	sitivity of the want the same serio	vork. This standard usness and
Are you willing to	take a polygraph exa	mination? [ ] Yes	[ ] No		
	to adhere to the rules to Springs which incl				ce Department and
Signature			Date_		
	about the Colorado S		tment's Es	pañol Service P	rogram?

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