

**CONSULTANCY APPLICATION FORM**

**The consultation title: PREQUALIFIED INTERPRETER/ TRANSLATOR**

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| **PERSONAL DATA** |
| **Full name (first, middle, last):**  |
| **Nationality** | **Date of birth (dd/mm/yyyy)** | **Place of birth** | **Sex (male, female)** |
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| **ADDRESS** |
| **Permanent Address** | **Professional Domicile** |
| **Address:** |  | **Address:** |  |
| **City-Country:** |  | **City-Country:** |  |
| **Tel. No.:** |  | **Tel. No.:** |  |
| **Mobile No.:**  |  | **Mobile No.:**  |  |
| **WhatsApp No.:** |  | **WhatsApp No.:** |  |
| **Fax:** |  | **Fax:** |  |
| **Official email:**  |  | **Official email:**  |  |
| **Private email:**  |  | **Private email:**  |  |

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| **LANGUAGE PROFICIENCY** |
| **Languages** | **Read** | **Write** | **Speak** |
|  | **Poor** | **Fair** | **Good** | **V.good** | **Excellent** | **Poor** | **Fair** | **Good** | **V.good** | **Excellent** | **Poor** | **Fair** | **Good** | **V.good** | **Excellent** |
| **ARABIC** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **ENGLISH** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **FRENCH** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **PORTUGUESE** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **SPANISH** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **SWAHILI** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Language Combination:****Language (A) …………………………………..…………………………… (B) …………………………………..…………………………… (C) …………………………………..…………………………… (D) …………………………………..……………………………****From ( ) …………………………………..…… To ( ) …………………………………..……****From ( ) …………………………………..…… To ( ) …………………………………..……****From ( ) …………………………………..…… To ( ) …………………………………..……****From ( ) …………………………………..…… To ( ) …………………………………..……** |

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| **Institution** | **Academic Degree Obtained** |
| **Year** |  |
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\*Please attach the copies of the mentioned degrees.

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| **Institution** | **Certificate Obtained** |
| **Year** |  |
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| **COMPUTER SKILLS:** |
| **Software:** | **Poor** | **Fair** | **Good** | **V. good** | **Software:** | **Poor** | **Fair** | **Good** | **V. good** |
| **Microsoft Word**  |  |  |  |  | **Microsoft Excel** |  |  |  |  |
| **Document formatting** |  |  |  |  | **PDF conversion** |  |  |  |  |
| **Microsoft PowerPoint** |  |  |  |  | **CAT Tools** |  |  |  |  |
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| **Other software** | **Poor** | **Fair** | **Good** | **V. good** | **Software:** | **Poor** | **Fair** | **Good** | **V. good** |
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| **PROFESSIONAL EXPERIENCE\*\*** |
| **Employer** | **Duration** | **Position** | **# of words translated** | **Type of Business** |
| **From** | **To** |
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\*\*Please attach copies of work certificates, screenshots of assignment letters, contracts and/or POs. You may provide additional information on the separate sheet attached.

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| **MEMBERSHIP OF PROFESSIONAL SOCIETIES**  |
| Are you a member of any local or international professional society? If yes please list them: |
| **Membership** | **From** | **To** |
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| **REFERENCES** |
| **List three persons, not related to you, who are familiar with your character and qualifications** |
|  |
| **Full Name** | **Email** | **Telephone** | **WhatsApp** | **Business or Job** |
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Signature: **………………………………………………………………………..** Date: **…………………………………………………..**

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| **OTHER PROFESSIONAL EXPERIENCE** |
| **Employer** | **Duration** | **Position** | **# of words translated** | **Type of Business** |
| **From** | **To** |
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