



# SASKATOON POLICE SERVICE

## INTERPRETER TRAINING PROGRAM APPLICATION

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date of Birth (Year/Month/Day): \_\_\_\_\_ Gender: Male  Female

Employer: \_\_\_\_\_ Employer's Address: \_\_\_\_\_

Position: \_\_\_\_\_

Duties: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Please list the languages you are able to speak, read and write: \_\_\_\_\_

Are you willing to commit 50 hours time (mainly weekends and evenings) to participate in the training? Yes  No

Certificates will be presented to all successful participants.

Can you legally work in Canada? Yes  No

I hereby authorize the Saskatoon Police Service to conduct a Criminal Occurrence Security Check and make such investigation of their records or such other investigation as may be deemed appropriate and on the basis of such an investigation, to indicate the approval or rejection of this application.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

### Return Application to:

[Interpreter.program@police.saskatoon.sk.ca](mailto:Interpreter.program@police.saskatoon.sk.ca)  
Equity and Cultural Engagement Unit  
Saskatoon Police Service  
Box 1728  
Saskatoon, SK S7K 3R6