

CABRILLO COMMUNITY COLLEGE DISTRICT SUPPLEMENTAL QUESTIONNAIRE FOR FACULTY BILINGUAL CANDIDATES

Fo	the position of:
Aŗ	olicant's name:
Ins	tructions: The information requested below is for all bilingual candidates. Please submit this supplemental information as well as all other materials specified under "Application Procedure" on the job announcement. You may include references to resumes and other material in completing this form.
Plo	ase complete:
1.	Please write a narrative synopsis (not to exceed one attached page) that describes your bilingual skill and ability. This may include education, experience, certificates and/or training.
2.	List the names, addresses and phone numbers of three (3) references who will attest to your bilingual skill and ability, preferably in a professional setting.
	Name Address Telephone Number
	rtify that to the best of my knowledge the foregoing statements are complete, true and correct. If ployed, I understand that I may be subject to dismissal if they are found to be untrue or incorrect.
Się	natureDate