OPRLS DEV

OLS Development

Welcome: Pamela Watkins

Logout

Filter

LS Testing Application

New Application

Ls Testing Request

Submit

| | |
|---|---|
| OMB APPROVAL NO. | 1405-0191 |
| EXPIRES | XX-XX-XXXX |
| ESTIMATED BURDEN | 30 MINUTES |

PRIVACY ACT STATEMENT Authorities: This form is authorized by 5 U.S.C. 3109 Purpose: The information solicited on this form is necessary for consideration for contract positions with the U.S. Department of State Office of Language Services. Routine Uses: The information on this form may be shared with potential employers, credit institutions, rental offices, etc. requesting verification of employment and/or earnings. This information may also be released to other government agencies having a statutory or other lawful authority to maintain such information. For further information see State-37, Translator and Interpreter Records. Disclosures: Providing the requested information is voluntary. However, failure to provide the information requested may result in the failure of your application to be processed in a timely manner or at all. This may affect your contract prospects.

PAPERWORK REDUCTION ACT (PRA) STATEMENT: Public reporting burden for this collection information is estimated to average 30 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: Office of Language Services, 14th Floor, 2401 E. Street NW, U.S. Department of State, Washington, DC 20522.

General Information * | Contact Information * | Mailing Address * | Education | Employment | Interpretation | Translation

| | | | |
|---|---|---|---|
| * First Name | | | |
| Middle Name | | | |
| * Last Name | | | |
| Prefix | | | |
| * Legal U.S. Resident | -- None -- | * Country of Birth | |
| | | * Applicant Type | Both |
| Previously Applied or Worked | | | |

Submit