



UNITED STATES COAST GUARD AUXILIARY NEW INTERPRETER APPLICATION

Email this completed form to Division Chief Interpreter Corps (DVC-IA) at
john.l.fiorilla@cgauxnet.us

Instructions: Fill in the below fields or use the pull down menus or click to provide responses

APPLICANT NAME:

MEMBER ID NUMBER:

Phone:

FLOTILLA NUMBER:
(District-Division-Flotilla):

Email:

PREREQUISITES:

Status:
(Minimum BQ)

ICS 100 & 700:

Intro Risk Management:

AUXCT
(Core Training)

Favorable PSI:
(OS or DO)

U.S. DOD & OTHER QUALS: (click if applicable)

Anti Terrorism1

Human Rights

ISOPREP

Knowledge of

Survival, Evasion, Resistance & Escape 100.1

AUXCOM/TCO

Nautical Terms:

LANGUAGE APPLYING FOR AS INTERPRETER:
(one language only per application)

Spoken:

Written:

Reading:

Acquired:

ENGLISH:

Spoken:

Written:

Reading:

Acquired:

READINESS:

Available on call 24 hours?

Can Travel:

Need Advance Notice: (Days):

MILITARY:

Prior Armed Services:

EDUCATION:

Highest Level:

OTHER INTERPRETER / LANGUAGE DIPLOMAS / CERTIFICATIONS:

DPSI

FCI/FCT

ATA

DLPT

ILR

Other

COMMENTS: