

BILINGUAL PROGRAM FORM - PER 59

INSTRUCTIONS: This form must be used to: designate a position bilingual; request for bilingual skills examination; and/or to activate bilingual pay.
Please check the appropriate box for any action you are requesting. Directions on how to complete this form are on the reverse side.

GENERAL INFORMATION

DEPT _____ BUDGET INDEX _____ POSITION # _____ CLASS TITLE _____

☐ **DESIGNATE A POSITION BILINGUAL (English/Spanish)**

Name of Supervisor/Manager: _____ Work #: _____

Position Above Currently Designated: Level I Level II Request Designation of Position: Level I Level II

Percent of time bilingual skills are used in this position: _____ %.

Specific Bilingual duties of this position: Attach a MEMORANDUM explaining the duties of this position as it relates to the bilingual needs.

TO BE COMPLETED BY THE PERSONNEL DEPARTMENT.

Position Designated Level I (___) Level II (___)

Analyst Signature

Date

☐ **REQUEST FOR A BILINGUAL SKILLS EXAMINATION (English/Spanish)**

Name of Supervisor/Manager: _____ Work # _____

Please examine the person listed below for Level I Level II

Name: _____ Work # _____

Address _____ City _____ State _____ ZIP _____

TO BE COMPLETED BY THE PERSONNEL DEPARTMENT.

Date of Examination: _____ Proctor: _____

Level I: Pass (___) Fail (___) Level II: Pass (___) Fail (___) Date Candidate Notified: _____

Authorized Signature

Date

☐ **REQUEST TO ACTIVATE BILINGUAL PAY**

Please activate bilingual pay at Level I Level II

Employee Name: _____ Employee # _____ Position # _____

The above employee is being appointed to position # _____

TO BE COMPLETED BY THE PERSONNEL DEPARTMENT (Records Unit)

(___) Bilingual pay activated effective (date): _____ PP: _____ Keyed on: _____ Initials _____

(___) Bilingual pay NOT activated because:

(___) employee is not qualified at the requested level.

Initials _____

(___) position is not designated at the requested level.

(___) Other: _____

IV. DEPARTMENT HEAD SIGNATURE

I certify this position requires bilingual skills as indicated above and meets all of the conditions as stated in the Personnel Regulation Section 164 J. Bilingual Pay Differential.

Department Head Signature

Date

PER 59 INSTRUCTIONS

The requesting department should complete all the non-shaded areas applicable to the actions requested.

DEFINITIONS:

Level I (oral fluency) – is defined as “the ability to converse in the second language and to read English and translate orally into the second language”.

Level II (oral, reading, and writing fluency) is defined as the “ability to converse in the second language; to read English and translate orally into the second language; read the second language and translate orally into English; and to write in the second language.”

SUPPORTING DOCUMENTS:

1. A memo with detailed and specific justification for the position to be designated Level I and/or Level II.
2. An organizational chart indicating the positions in the specific unit/division that are receiving bilingual pay at Level I and/or Level II.
3. For Level II only:
 - Submit examples of the different types of materials in Spanish that must be read and translated into English in writing.
 - Submit examples of the different types of materials in English that must be written in Spanish.
 - Include an explanation of the purpose of these materials and frequency of their occurrence in the memo as indicated in #1 above.

NOTE: In addition to the items noted above, other documents and/or information may be requested to complete a review of this request.