

EDUCATION, PROFESSIONAL LICENSE OR CERTIFICATION AND FOREIGN LANGUAGE SKILLS QUESTIONNAIRE

The Department of Army is authorized to request this information and maintain this system under Section 301 of Title 5 of the U.S. Code, Section 3013 of Title 10 of the U.S. Code and Executive Order 9397. A more detailed statement concerning this database is contained in the Privacy Act Systems Notice located at http://www.defenselink.mil/privacy/notices/army/A0690-200_TAPC.html. This notice also provides a complete statement of "Routine Uses." The purpose of this questionnaire is to capture educational/foreign language skill data in the MODERN Defense Civilian Personnel Data System (MDCPDS) database. Request each employee complete this questionnaire. Furnishing the requested information is **voluntary**, but failure to do so may delay the processing by the personnel office of educational and training related actions or result in missed training opportunities. Questions regarding this action may be directed to the CPAC Chief, Commercial (301) 394-4347; DSN 290-4347; Fax (301) 394-5221 or via email jpapadop@arl.army.mil.

Note: Data annotated with an **asterisk (*)** will be used for statistical purposes only.

EMPLOYEE NAME: _____ SSN#: _____

1. Record the education information below for the following degrees, if applicable:

Bachelor's:

Major	School Name	School State
Year Degree Obtained	Grade Point Average (GPA) *	GPA Basis (4.0/5.0/Other)

Master's:

Major	School Name	School State
Year Degree Obtained	Grade Point Average (GPA) *	GPA Basis (4.0/5.0/Other)

Doctorate:

Major	School Name	School State
Year Degree Obtained	Grade Point Average (GPA) *	GPA Basis (4.0/5.0/Other)

2. If you have **NOT** obtained a degree, but have some college credits, please provide the data below:

Some College:

Major _____	School Name _____	School State _____
Projected Year of Graduation _____	Grade Point Average (GPA) _____ *	GPA Basis (4.0/5.0/Other) _____

3. If you have more than one degree, please list them separately below:

2nd Degree Obtained:

Major _____	School Name _____	School State _____
Year Degree Obtained _____	Grade Point Average (GPA) _____ *	GPA Basis (4.0/5.0/Other) _____

3rd Degree Obtained:

Major _____	School Name _____	School State _____
Year Degree Obtained _____	Grade Point Average (GPA) _____ *	GPA Basis (4.0/5.0/Other) _____

4th Degree Obtained:

Major _____	School Name _____	School State _____
Year Degree Obtained _____	Grade Point Average (GPA) _____ *	GPA Basis (4.0/5.0/Other) _____

4. Check the box that corresponds to the code that indicates your **HIGHEST** level of education obtained:

- YY Not Applicable
- 01 No Formal Education or Some Elementary School
- 02 Elementary School Completed - No High School
- 03 Some High School - Did Not Graduate
- 04 High School Graduate or Certificate of Equivalency (GED)
- 05 Terminal Occupation Program - Did Not Complete
- 06 Terminal Occupation Program - Certificate of Completion, Diploma or
- 07 Equivalent
- 08 Some College - Less Than 1 Year
- 09 1 Year of College
- 10 2 Years of College
- 11 Associate Degree
- 12 3 Years College
- 13 4 Years College
- 14 Bachelor's Degree
- 15 Post Bachelor's Degree
- 16 First Professional Degree
- 17 Post-First Professional
- 18 Master's Degree
- 19 Post Master's
- 20 Sixth-Year Degree
- 21 Post-Sixth Year
- 22 Doctorate Degree
Post Doctorate

5. Indicate the academic discipline (major) studied for the **HIGHEST** level of education obtained:

(i.e., Engineering, Computer Science, Business Management, etc.)

6. Indicate the total credit hours earned at the college or university where your **HIGHEST** level of education was

7. Check the box that indicates the type of credit hours earned at the college or university where your **HIGHEST** level

- (1) Semester (2) Quarter (3) Other (4) Not Applicable

8. Check the box that corresponds to the alphabetical code that describes the type of school attended at your **HIGHEST** level of education obtained.

- (H) High School or GED Equivalent
- (J) Junior College
- (C) College or University
- (S) Secretarial, Business or Commercial School
- (V) Vocational, Trade or Tech School (At High School Level)
- (W) Vocational, Trade or Tech School (Above High School Level)

9. Indicate the school name and school state for the **HIGHEST** level of education obtained.

(i.e., UNIV OF MD, JOHNS HOPKINS, etc.)

(Maryland, Virginia, Texas, etc.)

10. Indicate the Calendar Year in which your **HIGHEST** level of education was obtained.

**** If you need more space to record your degree information, please do so on a separate sheet of paper and attach to this questionnaire.**

PROFESSIONAL LICENSE OR CERTIFICATION

1. Do you have a Professional License or Certification? Yes No

If yes, please describe the Professional Licence or Certification below:

If yes, please provide the institution/school name that issued the Professional License or Certification:

If yes, please provide the State from which the Professional License or Certification was

If yes, please provide the year in which the Professional License or Certification was issued:

2. Number of Professional Memberships:

	<u>Member</u>	<u>Fellow</u>
International	_____	_____
National	_____	_____
Local	_____	_____

3. Number of Patents:

Applied _____ Accepted _____

4. Number of Publications:

Books	_____	Technical Reports	_____
Chapters	_____	Refereed Journals	_____
Monographs	_____	Book Reviews	_____
Articles	_____	Conference Papers	_____

**** If you need more space to record your Professional License or Certification information, please do so on a separate sheet of paper and attach to this questionnaire.**

FOREIGN LANGUAGE SKILLS

The following codes categorize language proficiency skills. Please assign the code that best describes your degree

<u>CODE</u>	<u>DESCRIPTION</u>
00	No Proficiency
06	Memorized
10	Elementary
16	Elementary-Plus
20	Limited working
26	Limited working-Plus
30	General Professional
36	General Professional-Plus
40	Advanced Professional
46	Advanced Professional-Plus
50	Functionally native

<u>LANGUAGE</u>	<u>SPEAKING CODE</u>	<u>READING CODE</u>	<u>LISTENING CODE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**** If you need more space to record your Foreign Language Skills information, please do so on a separate sheet of paper and attach to this questionnaire.**

This questionnaire has been completed to the best of my knowledge and reflects accurately my current Educational status, Professional License or Certifications, and Foreign Language Skills.

EMPLOYEE SIGNATURE _____ **DATE** _____

Your completion of this questionnaire is greatly appreciated!