



Department of Justice

NOVA SCOTIA DEPARTMENT OF JUSTICE
Court Services Division
COURT TRANSCRIBER CERTIFICATION PROGRAM
APPLICATION

1. *Personal Information:* (PLEASE ATTACH CURRENT RESUME and TWO LETTERS OF REFERENCE – ONE OF WHICH MUST RELATE TO YOUR LEGAL EXPERIENCE)

Name: _____

Home Address: _____ Postal Code: _____

Telephone No.: _____ Cell No.: _____ E-Mail: _____

Business Address: _____ Postal Code: _____

Telephone No.: _____ Fax No.: _____ E-Mail: _____

Social Insurance No.: _____

Present Employer: _____

Address: _____

Current Position Held: _____ No. of Years in Current Position: _____

Languages Spoken or Written (*Other than English*):

Language: _____ Level of Proficiency: _____

Language: _____ Level of Proficiency: _____

2. *Education:*

(a) Highest Grade Successfully Completed: _____ Province: _____

Date Completed: _____ Month _____ Year _____

(b) University: _____ Institution: _____

Degree Received: _____

Date Completed: Month _____ Year _____

If no degree obtained, which courses have you taken: _____

(c) Business/Community College: _____

Certificate/Diploma: _____

Date Completed: Month _____ Year _____

Courses Taken: _____

(d) Certification as a Court Transcriber requires three years of legal experience. Please describe your legal experience, including the number of years:

DATE: _____

SIGNATURE: _____