



LA RAZA LAWYERS ASSOCIATION  
Central Valley Chapter

**ENDORSEMENT QUESTIONNAIRE & APPLICATION**

DATE:

NAME:

ADDRESS:

PHONE:

E MAIL:

1. Why should La Raza Lawyers Association, Central Valley Chapter support you for this position?
  
2. Which organizations support your appointment? Please list contact names and telephone numbers.
  
3. Is there any known opposition by the Latino community of your appointment/election? If so, please list the organization(s) and your understanding of why they oppose your appointment.
  
4. What do you consider the major challenges facing Latinos today?
  
5. Please describe your plan to increase the representation of Latinos within your area of jurisdiction and/or increase delivery of services to Latinos.
  
6. What other information would you like to share with us?

\*\*\*\*Additionally, please attach a brief resume for review by LRLA Membership.\*\*\*\*