



## Request for Endorsement

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**Name:** \_\_\_\_\_ **Position Sought:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City State Zip:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Are you a member of BWL:** Yes [ ] No [ ]

**If so, number of years:** \_\_\_\_\_

**Current Title/Position of Employment:** \_\_\_\_\_

**Work Address:** \_\_\_\_\_

**Work City State Zip:** \_\_\_\_\_

**Length of time in Current Employment:** \_\_\_\_\_ **Years** \_\_\_\_\_ **Months**

**Year admitted to the California State Bar:** \_\_\_\_\_

**Previous Work Experience relevant to position sought:** \_\_\_\_\_

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**List Your Professional Associations & Affiliations:**

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**List Your Civic, Social & Community Associations & Affiliations:**

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**Why do you believe an endorsement from BWL will enhance your application:**

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**Discuss in detail your ties to the African American community and any activities in which you have engaged which have been of benefit to the African American community.**

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