



Kern County Elections Division
1115 Truxtun Avenue, 1st Floor
Bakersfield, CA 93301
661-868-3590

Language Accessibility Advisory Committee

To apply for membership on the committee, please complete the following application. We have enclosed an addressed envelope for you to mail your application back to our office. Thank you for your interest in joining the Kern County LAAC.

Application Information

First Name		Last Name	
Email Address		Phone Number	
Residence Address			
City	State	Zip	
Mailing Address (if different than Residence Address)			
City	State	Zip	

1. Briefly describe your experience working or volunteering with language diverse communities.

2. Please state the language(s) you are fluent in and level of fluency in each language (read, speak and write).

3. Please list any additional relevant experience in education, elections or insights into minority voter outreach.