



# POLL WORKER APPLICATION



PRINT Last Name First Name Initial Date of Birth

RESIDENCE ADDRESS CITY ZIP CODE

PHONE (HOME) (WORK) (CELL)

Are you registered to vote? \_\_\_\_\_ Can you be called on short notice? \_\_\_\_\_

List any previous election experience. \_\_\_\_\_

Do you have a facility to offer for use \_\_\_\_\_

County Employee? \_\_\_\_\_ High School Student? \_\_\_\_\_ Event \_\_\_\_\_

Do you have a request to work with another person or in a specific area \_\_\_\_\_

Previous work experience \_\_\_\_\_ PARTY AFFILIATION \_\_\_\_\_



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