

# ELECTION INSPECTOR APPLICATION

(NAME OF CITY OR TOWNSHIP)

(Must be completed in your own handwriting in ink)

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Email Address \_\_\_\_\_

Home Address \_\_\_\_\_

Phone #'s Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Registered in  City or  Township of \_\_\_\_\_ Pct # \_\_\_\_\_ Ward # \_\_\_\_\_

County of \_\_\_\_\_

Political Party Affiliation (**REQUIRED**; Other Party must be a recognized state party & may not be Independent):

Republican Party       Democratic Party       Other Party \_\_\_\_\_

Have you ever been convicted of a felony or election crime?       Yes       No

Education Background (include highest grade completed or degrees held) \_\_\_\_\_

Employment Background (include current or last place of employment and type or work performed)

Languages other than English that you speak (if any) \_\_\_\_\_

Please rate your computer experience (data look-up, database processing, internet use specifically):

5 = very experienced, 1 = not experienced

1       2       3       4       5

Past experience as an election inspector, if any (include name of jurisdiction) \_\_\_\_\_

Do you have transportation?  Yes  No      Will you work at any polling place?  Yes  No

I CERTIFY THAT I am not a member or a known active advocate\* of a political party other than the party identified above. I FURTHER CERTIFY THAT the foregoing statements are true to the best of my knowledge and belief.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\* A "known active advocate" of another political party is defined to mean a person who 1) is a delegate to the convention or an officer of another party 2) is affiliated with another party through an elected or appointed government position or 3) has made documented public statements specifically supporting by name another political party or its candidates in the same calendar year as the election at which the person will serve as an inspector. "Documented public statements" means statements reported by the news media or written statements with a clear and unambiguous attribution to the applicant.

ANY FALSE STATEMENTS MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT.