POLL WORKER APPLICATION

VOTER REGISTRATION #		PARTY	PRECINCT#
Print Name:			
(Last)		(First)	(M.I.)
Street Address:		(City)	(Zip)
Mailing Address: If different from	Street Address		
Contact numbers: (Home)		(Work)	
(Cell)		(E-mail)	
Date of BirthMM/DD/YY	SexRace_	Social Security #(SS# to	used only for payroll purposes)
Have you ever worked as a poll I would like the position of:		stant Clerk Inspector	
 Be able to speak, read Be able to attend the red Be available to work a hours or more on Elect Be able to lift and asse Be able to refrain from 	ated States and a reg and write the English equired poll worker all day on Election Day.) You will emble the voting equal of any comments or one, while working at t	training before each election of the property of the clerk what ipment that weighs approximately discussion, concerning a careful polls. You must be Not the polls.	n. but will be required to work 13 men all work is completed. Imately 20 to 55 pounds. Indidate or issue, with either a
I UNDERSTAND AND MEET INFORMATION I HAVE SUB	•		OVE AND DECLARE THE
(Signature	e)		(Date)
*****Completed applications s	Sylvia Jackson County S P. O.	o the Elections Office at 285 D. Stephens Supervisor of Elections . Box 6046	1 Jefferson St., or mailed to:

PH: 482-9652 FAX 482-9102 www.jacksoncountysoe.org