

Election Inspector Application

Full Name: _____

Date of Birth: ____/____/____ Social Security #: ____-____-____

Home Address: _____

Phone #: _____ Email: _____

Registered in: _____ Precinct #: _____

Political Party Affiliation (You **must** select one):

Republican Party Democratic Party Green Party Libertarian Party Natural Law
(Independent is **NOT** accepted)

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

Experience as an election inspector: _____

Rate your expertise with computers:

1 2 3 4 5
None Beginner Average User Above Average Expert

Education Background (include the highest grade completed): _____

Employment Background (include the type of work): _____

Do you have transportation: 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.