

ELECTION BOARD WORKER INFORMATION WORKSHEET
(Please fill out and return ONLY if interested in being a worker)

Name (please print) _____

Address _____

Home Phone # _____ Cell Phone # _____

Party Affiliation _____ Email _____

Please circle or fill in the appropriate responses:

1. Do you have computer experience? YES NO
If yes, list programs you have worked with: _____

2. Are you willing to work at any polling place? YES NO

3. Do you need any accommodations to assist in fulfilling your duties?
Handicap Parking Space YES NO
Handicap Restroom YES NO
Other _____

4. Are you able to stand for long periods of time? YES NO

5. Have you ever been convicted of a misdemeanor or felony? YES NO
If yes, list when, where and nature of offense(s) _____

6. Do you know of anyone else who would be interested in working the elections?
Name, Address & Phone: _____

Please list a name(s) and telephone number(s) of someone that we may contact in an emergency.

CONTACT #1 _____ PHONE # _____

CONTACT #2 _____ PHONE # _____

"I swear or affirm that I am a citizen of the United States and a Kansas resident, that if convicted of a felony, I have had my civil rights restored. I have told the truth on this worksheet, and the information provided is complete and correct to the best of my knowledge. I understand that any incomplete, incorrect or false information furnished by me may void this application."

Signature of Applicant

Date