

ELECTION INSPECTOR APPLICATION ROSE TOWNSHIP

(Must be completed in your own handwriting in ink)

Name in Full _____

Date of Birth ____ / ____ / ____ Social Security Number _____

Home Address _____

Home Telephone _____ Work Telephone _____

City

Registered in Township of _____ Precinct _____ Ward # _____

Village

County of _____ Length of Residence in County _____

Political Party Affiliation (to be eligible for appointment, you **MUST** check one):

Republican Party

Democratic Party

Other Party _____

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

Educational Background – (include highest grade completed or degrees held) _____

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

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 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.

_____ Date ____ / ____ / ____

(Signature of Applicant)

ANY FALSE STATEMENT MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT