

OSAGE COUNTY ELECTION WORKER APPLICATION

Please print all answers legibly

First Name _____ Last Name _____ Middle Name _____

Physical Address _____ City _____ Zip _____

Mailing Address (if different) _____ City _____ Zip _____

Date of Birth ____ / ____ / ____ Gender _____ Last 4 of SSN _____

Home Phone # _____ Cell Phone # _____ Email _____

Emergency Contact _____ Relation _____ Phone # _____

Party Affiliation _____ Preferred Polling Location _____

Please review the benchmarks below before submitting your name for consideration (check all that apply):

- I can attend required election worker training each year
- I am not a candidate on the ballot (except precinct committeeman or committeewoman)
- I have transportation to/from the work site
- I am able to:
 - Lift, push or pull 25-30 pounds on occasion (not sustained, but as needed to set up and close the site)
 - Work / stand in a busy environment for approximately 16 consecutive hours on Election Day
 - Follow written procedures and check-lists provided in order to meet the requirements of the law

Please check the appropriate response:

1. Do you have computer experience? YES NO
2. Are you willing to work in any precinct in the county? YES NO
3. Are you bilingual? YES: List languages spoken _____
4. Are you currently registered to vote in Osage County? YES NO
5. Have you ever worked at a polling site before? YES NO

"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 application, 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

For Office Use Only:

Registered Voter		PP
Voter ID#	Date Received	R D L U NR