

CARROLL COUNTY BOARD OF ELECTIONS AND REGISTRATION

997 Newnan Road, P.O. Box 338, Carrollton, GA 30117

POLL WORKER EMPLOYMENT APPLICATION

First Name

Last Name

Address

Apartment #

City

State

Zip

Phone/Cell _____ **Email Address** _____

Are you a registered voter?

Yes ____ No ____

Are you a resident of Carroll County?

Yes ____ No ____

Current or most recent employer?

Are you a Carroll County employee?

Yes ____ No ____

Are you a Citizen of the United States?

Yes ____ No ____

Have you ever worked as a poll official?

Yes ____ No ____

If so where?

PLEASE CIRCLE ANY POSITIONS YOU ARE INTERESTED IN

Election Day Worker:

Manager

Assistant Manager

Clerk

Advance Voting Worker:

Yes ____

No ____

Precinct/Polling Place Preference: _____

CERTIFICATION AND SIGNATURE

By signing below, I certify that the above information is true and correct, I am at least 16 years of age, I am able to read, write and speak the English language, I am a United States citizen, I do not hold a public office, I am not a candidate for public office, and I am not related to a candidate whose name will appear on the ballot. ("Related to" means a parent, spouse, child, brother, sister, father-in-law, mother-in-law, son-in-law, or sister-in-law of a candidate.)

SIGNATURE _____ **DATE** _____

This application will be maintained in files for one year from the date of application. Applicants will be considered when work is available by Carroll County Elections Supervisor.