

**CARROLL COUNTY BOARD OF ELECTIONS AND REGISTRATION**

423 College Street, 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.