

**ELECTION INSPECTOR APPLICATION
CHARTER TOWNSHIP OF HARRISON**

(Must be completed in your own handwriting in ink)

Name in Full: _____

Date of Birth: ___/___/___ Social Security Number: _____-_____-_____

Home Address: _____

Home Phone: _____ Work Phone Number: _____

Registered in: ___ City Precinct Number: _____
___ Township of _____
___ Village Ward Number: _____

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

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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 poll location? ___ Yes ___ No

I CERTIFY THAT I am not a member or a 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

*A "known active advocate" of another political party is defined to mean a person who 1) is a delegate to the convention or an officer of another party 2) is affiliated with another party through an elected or appointed government position and 3) has made documented public statements specifically supporting by name another political party or its candidates in the same calendar year as the election at which the person will serve as an election inspector. "Documented public statements" means statements reported by the news media or written statements with a clear and unambiguous attribution to the applicant.

ANY FALSE STATEMENTS MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT.