

Election Inspector Application City of Swartz Creek

(Must be completed in your own handwriting in ink)

Name in Full: _____ Date of Birth ____/____/____

Home Address: _____

Home Phone: _____ Work or Cell Phone: _____

Length of Residence in City: _____

Registered in Precinct: _____ Social Security Number: _____

Political party Affiliation (to be eligible for appointment you MUST check one):

Republican Party: /____/

Democratic Party: /____/

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

Educational Background – Include highest grad 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 in any polling place? 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.

Signature of Applicant

Date: ____/____/____

*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 or 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 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