Election Board Worker Application

Please complete the following information:

Name: _____DOB: _____
Address: _____
Mailing Address:_____
Phone: _____
Email Address: _____

☐ **Please check this box to be removed from the Election Worker list.**

Please circle/write your responses: You must be a current registered voter.

1. Do you currently live in Labette County? Yes No
2. Are you a registered voter in Labette County? Yes No
3. Do you have transportation? Yes No
4. Are you able to attend training? (2-4hrs) Yes No
5. Can you work a 14+ hr. shift? Yes No
6. Are you comfortable working under pressure? Yes No
7. Can you lift up to 5-10 lbs.? Yes No
8. Have you ever been convicted of a felony? Yes No

Why do you think working as an election board worker is important?

_____

_____

Please list an emergency contact number: *Name, Address, Phone Number*

_____

_____

I hereby declare that all the given information above is true to the best of my knowledge and ability, I understand that any incorrect incomplete, or false information furnished by me may void this application.

_____ _____
Signature of Applicant Date

Thank You For Your Interest In Serving Labette County.

Office Use Only:

Rec'd by: _____ Ward/Twp: _____ Date Rec'd Stamp:

Labette County Clerk's Office
Attention: Election Division
501 Merchant/PO Box 387
Oswego, KS 67356

Updated: 6/26tc