

Poll Worker Application

1. _____
First Name *Middle* *Last Name*

2. _____
Address *City* *Zip Code*

3. _____
Mailing Address (If different than above)

4. _____
Home Telephone # *Cell Phone #*

5. Are you a Registered Voter?

Yes

No

6. Have you ever served as an Election Board Worker?

Yes

No

7. Would you accept assignment to another town in your county?

Yes

No

(If you checked yes, please list below what town(s) you prefer)

8. State the Political Party to which you belong? _____

9. Do you speak any other language in addition to English?
If so what language(s)?

Yes

No

Signature

Date

Please mail or fax completed form to:

Gloucester County Board of Elections
P.O. Box 352
Woodbury, NJ 08096
Tel: 856-384-4500
Fax: 856-251-1647