

Precinct Official Application

Applicant Information

Full Name: _____ Date of Birth: _____
Last First MI mm/dd/yyyy

Physical Address: _____
Street City, State, Zip

Mailing Address: _____

E-Mail Address: _____ @ _____

Cell Phone: () _____ - _____

Alternate Phone: () _____ - _____

Are you interested in working one-stop? _____

Registered Political Party: _____

I am over the age of 18: Yes No I am a US Citizen: Yes No

I will be able to attend 2-hour training sessions on 2 different days before elections: Yes No

I am able to lift 30 lbs: Yes No

I am able to work from 6:00 a.m. to at least 8:00 p.m. on Election Day: Yes No

Skills/Qualifications

Elections Experience:

Please Explain -

Computer Experience:

Please Explain -

Please rate your knowledge of the following applications or computer areas:

(Please enter the appropriate number. 1 being zero knowledge & 10 being you could teach the class.)

Microsoft Word

Microsoft Excel

Microsoft Outlook/Outlook Express

EViD

The information contained on this application is accurate and correct to the best of my knowledge:

Signed: _____

Date: ___/___/___

Please Mail or Return to: **Franklin County Board of Elections**
P.O. Box 180
Louisburg, NC 27549