ELECTION WORKER APPLICATION An Equal Opportunity Employer

Name:			Date:	
Address:				
City:				Zip Code:
Email address:				
Telephone(s) Home ()	Yes No C	Are you a re	egistered voter? \	` '
If Yes, what department?		_ Job title _		
Have you been given a description or had Do you understand the requirement Can you perform the requirements List any other names, if any, you had	its? Yes No with or without a		<u> </u>	
EDUCATION RECORD				
Did you graduate from high school	or receive a GED	certificate	? Yes 🗌 No 🗌	
School Name	Location	Hours Earned	Diploma, Degree or Certificate	Major Field of Study
Business/Technical/Vocational				
1.				
2.				
College/University (Undergraduate)				
1.				
2.				
Graduate School				

LICENSES (Optional, unless required for the volunteer work for which you are now applying.)					
List driver's license and other current licenses, certifications, or registrations required for the volunteer work for which you are applying. Indicate types, state license numbers, and expiration dates					
List any special skills you possess and/or equipment or office machines you can operate.					
OTHER INFORMATION					
Have you ever been convicted of, pled guilty or nolo contender to, or been granted deferred adjudication for a felony, misdemeanor, (excluding juvenile adjudication), or any lesser crime other than a minor traffic infraction? ☐ Yes ☐ No					
Do you have any pending court charges that have not been adjudicated?					
If you have answered yes to either question, list all such offenses and provide date, name of court, and disposition below (if any). You may omit minor traffic violations for which you paid a fine of \$50 or less. Omission of information may be considered cause for disqualification from the volunteer pre-screening process or result in discharge from volunteer services.					
Have you ever been disciplined in your employment related to workplace violence? Yes _ No _ If yes, please explain:					
Do you presently use illegal drugs? Yes ☐ No ☐					
HISTORY OF VOLUNTEER ACTIVITIES AND PAID EMPLOYMENT Provide information regarding paid and volunteer work (include military employment if duties/assignments relate to the job you are applying for). Describe your most recent experience first; then list other relevant positions in chronological order, working down frethe most recent. Use additional sheets if necessary.					
May we contact all employers listed? Yes No (Attach a list of any exceptions with an explanation					
Employer: Position:					
Address: From (Mo./Yr.) To (Mo./Yr.)					
City, State, Zip: Hours per week					
Supervisor's Name/Title: Telephone:					

Paid or Volunteer Assignments:

Employ	/er:	Position:			
Address	s:	From (Mo./Yr.)	To (Mo./Yr.)		
City, St	tate, Zip:	Hours per week	<u>—</u>		
Supervi	Supervisor's Name/Title: Telephone:				
Paid or Volunteer Assignments:					
Please state below any other information that would be helpful in determining your qualifications for the volunteer activities. You may include significant accomplishments, previous career highlights, or any other information that is not included in this volunteer application.					
ACKNO	OWLEDGMENTS				
Please READ ALL of the following statements and INITIAL EACH of the boxes to indicate you have read and understand each of the statements. If you have questions, contact					
	This is not an application for a paseparate application form.	aid position. Application for paid posit	tions must be made on a		
	information regarding my previous licenses, military service, criminal volunteering with employer . In a search which includes criminal his requires driving a vehicle, I author (DMV) search. I further authorize	any employer or individual to obtain find the semployment, volunteer services, explored in this tory, characteristics or traits, or caddition, I authorize Eureka County to istory, military history, and if the positorize Eureka County to conduct a Defe Eureka County to contact any institution of education, licenses, and/or certification.	education, certificates, other qualifications for conduct a background tion for which I am applying partment of Motor Vehicles cution and/or licensing		
	n exchange for employer's consideration of my volunteer application, I authorize anyone cossessing this information to furnish it to employer upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including employer , from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.				
	reasons and am doing so freely a recognize that I will not receive n than possible nominal fees, paid at the sole discretion of employe	unteer to provide services for civic, cand without coercion, direct or implie or do I expect compensation for the expenses, or reasonable benefits wher for performing the offered services are in preparation for employment w	d, from employer . I services I am offering, other nich may be provided to me. It is not my purpose nor		
The facts set forth in my volunteer application are true and complete. I understand that if asked to volunteer, any false statement on this application may result in my dismissal.					
Signati	ure of Applicant:	Date:			