

PRECINCT ELECTION OFFICIAL **APPLICATION**

Please type or print clearly on form.

Name:	Date of I	Birth: / /
Address:	City:	ZIP:
Phone: () Email	Address:	
1. Are you registered to vote in Portage County?		YES or NO
2. Have you ever been convicted of a felony?		YES or NO
3. What is your party affiliation?	Democratic Republica	an Other/None
4. Have you ever worked as a precinct election official?		YES or NO
If "yes," when and where	?	
5. Do you have computer experience?		YES or NO
6. Do you have transportation available for Election Day?		YES or NO
7. Are you able to lift up to 25 pounds?		YES or NO
8. Do you speak any languages other than English?		YES or NO
If "yes," please list langua	age(s) spoken:	
9. Please list the areas of Portag	ge County where you are willin	ng to work:
10. Are you available for future e	elections?	YES or NO
If "no," please explain:		
Signature:		Date: / /

Under penalty of perjury, I hereby affirm that the above information is true and accurate. Further, I authorize the Portage County Board of Elections to conduct a criminal background check. I understand that any active warrants or felony convictions on my criminal record will result in immediate termination as an election official. No person who has been convicted of a felony or any violation of election laws shall serve as an election officer, pursuant to ORC 3501.27.