

POLL WORKER APPLICATION

NAME _____

SOCIAL SECURITY NUMBER _____

VOTER REGISTRATION NUMBER _____

DATE OF BIRTH _____

STREET ADDRESS _____

APT.# _____

CITY _____

STATE _____

ZIP CODE _____

HOME PHONE NUMBER _____

WORK PHONE NUMBER _____

CELLULAR PHONE NUMBER _____

EMAIL ADDRESS _____

Y N HAVE YOU EVER WORKED AS A POLL WORKER
IN MIAMI-DADE COUNTY? _____

Y N DO YOU SPEAK ANY OTHER LANGUAGES FLUENTLY?
IF YES SPECIFY _____

Y N DO YOU HAVE TRANSPORTATION?

Y N ARE YOU A MIAMI-DADE COUNTY EMPLOYEE?
NAME THE DEPARTMENT _____

Y N WOULD YOU ACCEPT ASSIGNMENT TO A PRECINCT
OTHER THAN YOUR OWN?

I CERTIFY THAT: I am now registered as a voter in Miami-Dade County. I can read and write the English language, and my answers are correct, to the best of my knowledge and belief.

SIGNATURE

DATE

