

Douglas County Election Office Election Worker Application

Full Name:	Preferred Name:		
Home Address:	City :	Zip:	
Mailing Address (only if different):			
Home Phone:	Cell Phone:		
Email Address:			
1. May we text reminders to you?	4. Election Day - All Day or S	plit Shift? Please circle one	
□ Yes	5. I am interested in serving in	these positions:	
□ No	(Please check all that apply)		
2. Mail Preference	Election Day Supervising Judge		
🗖 Mail	Election Day Clerk	-	
Email	□ Advance Voting Site		
3. Please check all that apply:	□ Early Voting in our o	office	
□ I will work only in my home precinct	□ Advance Mail Board	Advance Mail Board	
□ I am willing to work in any precinct	□ Write In Board		
□ I must work with my Spouse	Canvass Board		
\Box I prefer to work with my Spouse	□ Audit Board		
Emergency Contact Names and Phone Numbers			
1. Contact Name	Contact Phone		
2. Contact Name	Contact Phone		
I affirm that: I have never been convicted of a crime; I am a U.S. citizen of the United States and	is a registered voter in Douglas Cour	nty.	
The information provided is complete and correct to t incorrect, or false information furnished by me may v		d that any incomplete,	
Signed	Date	e	
Submission Instructions			
 Return completed applications: By Email:scan or take a picture of the application By Mail or In Person: 711 W. 23rd Street Suite 		untyks.org	

• By fax: 785-832-5192