

## **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 Split 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 office	
☐ I will work only in my home precinct	☐ Advance Mail Board	
☐ I am willing to work in any precinct	☐ Write In Board	
☐ I must work with my Spouse	☐ Canvass Board	
☐ 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;	Lie e monisteme d'aveteurie Deserte C	year.
☐ I am a U.S. citizen of the United States and	is a registered voter in Douglas Co	ounty.
The information provided is complete and correct to t incorrect, or false information furnished by me may v		and that any incomplete,
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Return completed applications:

- By Email:scan or take a picture of the application and email to elections@douglascountyks.org
  By Mail or In Person: 711 W. 23<sup>rd</sup> Street Suite 1, Lawrence, KS 66044
- By fax: 785-832-5192