CHARTER TOWNSHIP OF CHESTERFIELD ELECTION INSPECTOR APPLICATION

Full Name:		Date of Birth:		
Phone#:	Cell Phone#: E-mail:			
Home Address:	City/Zip:			
Political Party Affi	lliation: (To be eligible y	ou MUST check one)		
☐ Republic		Democratic	□ Libe	ertarian
☐ U.S. Taxpayers	s □ Green	□ Natural L	aw [☐ Working Class
Are you a registered vot	er? Yes / No Where?			
	nvicted of a felony or elec			
Educational Background	l (Include highest grade co	mpleted or degrees he	ld)	
Employment Backgroun	d (Include current or last pl	ace of employment an	d type of work	c performed)
Past experience as an e	lection inspector, if any (Include name of jurisdi	ction)	
Do you have transportat	ion? Yes / No Will yo	ou work at any polling	place? Yes	/ No
Please rate your compute 1=not experienced, 5=very	ter experience (data look-u v experienced 1	p, data processing, creat		
officer of another party; 2.) Is a documented public statement year as the election at which the	another political party is defin iffiliated with another party thro s specifically supporting by na ne person will serve as an electi r written statement with a clear	ough an elected or appoint ame another political part on inspector. <i>"Document</i>	ted government y or its candida ed public stater	t position; or 3.) Has made ates in the same calendar ments" means statements
	not a member or a know I FURTHER CERTIFY T f.		•	
Signa				Date