



Board of Elections
83 Spring Street, Suite 305
Newton, NJ 07860
973-579-0950

Poll Worker Application

PERSONAL INFORMATION

Full Name: _____

Address: _____ City: _____ Zip: _____

Mailing Address (if different) _____

Primary Phone Number: _____ Email: _____

QUALIFICATIONS

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I am a U.S. Citizen |
| <input type="checkbox"/> | <input type="checkbox"/> | I am a resident of the State of NJ. |
| <input type="checkbox"/> | <input type="checkbox"/> | My eyesight, with or without correction, is sufficient to read nonpareil (unequal) type |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the ability to read and write the English language |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the ability to add and subtract figures (numbers) correctly |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the ability to write legibly with reasonable facility |
| <input type="checkbox"/> | <input type="checkbox"/> | I am a Registered Voter |
| <input type="checkbox"/> | <input type="checkbox"/> | I have health sufficient to discharge my duties as an election officer and can lift 20 lbs with ease. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the ability to attend a training class and retain reasonable knowledge of the duties performed as an election officer under the election laws of the State of New Jersey. |

Please state your Political Party Affiliation (or Unaffiliated status) _____

CERTIFICATION

Upon signing of this certification, I swear, or affirm, that:

1. I am of good moral character and have not been convicted of any crime involving moral turpitude;
2. If I become a candidate or a relative of a candidate appearing on the ballot for any election to which I am appointed to work, I will immediately notify the Board of Elections for possible reassignment;
3. I will faithfully and impartially discharge all the duties of a member of the District Board of Election in the County of Sussex to the best of my ability;
4. I will support the Constitution of the United States and the Constitution of the State of New Jersey, and that I will faithfully, impartially and justly perform all the duties of the office of a District Board Worker, according to the best of my abilities and understanding so help me God.
5. By signing this certification, I hereby attest that I am ready, willing and able to work both the June and November elections for the upcoming year.

Signature of Poll Worker Applicant: _____ Date: _____

Revised 2/2023