

Hunterdon County Board of Elections

Poll Worker Application

1.	_____	_____	_____
	First Name	Middle	Last Name
2.	_____	_____	_____
	Address	City	Zip
3.	_____		
	Mailing Address (if different than above)		
4.	_____	5.	_____
	Home Phone		Cell Phone
6.	_____	7.	_____
	Social Security Number (mandatory)		Date of Birth
9.	_____		
	Email Address		
9.	Are you a Registered Voter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Have you ever served as an Election Board Worker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11.	Would you accept assignment to a town other than your own? (If you checked yes, please list below any town(s) you prefer:)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	_____	_____	
	_____	_____	
12.	State the Political Party to which you belong? _____		
13.	Do you speak any other language(s) than English? (If so, please list below which language(s)©	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	_____	_____	
	_____	_____	
	_____	_____	
	(Signature)	(Date)	

☐ I ACCEPT. Please check this box in lieu of signature if you are submitting this form electronically indicating you agree to waive formal signature.

☐ Please review your input and click the button to the left to submit your form electronically to the Hunterdon County Election Board

OR PRINT AND MAIL FORM TO:

Hunterdon County Board of Elections
Permanent Registration Office
PO Box 2900
Flemington, NJ 08822
TEL: 908-788-1190 FAX: 908-806-4686