

★ ★ ★ STUDENT POLL WORKER APPLICATION ★ ★ ★

PLACER COUNTY ELECTIONS OFFICE

All students must have parent and teacher approval to be considered.
Please print legibly.

S T U D E N T	First Name:		Last Name:	
	High School:			
	Home Address:		Date of Birth:	
	City:	Zip Code:	Email:	
	Home Phone:		Cell Phone:	
	Can you speak and understand a language other than English? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If Yes, what language?				
I understand that to meet the legal requirements to qualify as a student poll worker, I must:				
<ul style="list-style-type: none"> ★ Be at least 16 years of age at time of the election in which I am serving. ★ Be a U. S. citizen or legal permanent resident at the time of the election in which I am serving. ★ Be a student in good standing at a public or private high school with a grade point average of at least 2.5. ★ Provide my own transportation on Election Day, and to attend required training. ★ Work the entire day from 6:00 a.m. until approximately 9:00 p.m. (breaks included). 				
Student Signature _____		Date _____		
Name:				
Emergency contact information on Election Day:				
This is to certify that I have read the parent letter and give my permission for my child, named above, to serve as a student poll worker in the upcoming election. I understand my child must attend mandatory training prior to Election Day and that they are expected to serve from 6:00 a.m. to approximately 9:00 p.m. on Election Day.				
Parent Signature _____		Date _____		
Name:				
High School:				
Phone Number:		Email:		
This is to certify that, to the best of my knowledge, the above-named student meets the requirements to be a student poll worker that are listed above. I am aware that if chosen, the above-named student will be working at a vote center from 6:00 a.m. until 9:00 p.m. on Election Day and will be absent from class.				
Teacher Signature _____		Date _____		
If you require permission from more than one teacher you may copy this form and have them fill out the teacher portion and submit it with the rest of your application.				

★ All applications must be complete and submitted to the Elections Office no later than _____ to be considered. ★
 Please note that submitting an application DOES NOT guarantee a position. If you are placed, you will receive a follow-up appointment letter via the email you provided on this application.

DEADLINE

RETURN VIA EMAIL, FAX, MAIL OR IN PERSON TO:

Placer County Elections Office
 3715 Atherton Rd. Ste. 2, Rocklin CA 95765

Email:
Placer_Precincts@placer.ca.gov

Fax: (530) 886-5688