



**City of Burton, Michigan
Election Inspector Application**

APPLICANT INFORMATION:

Full Name of Applicant (first, middle, last)	Date of Birth	Registered in Precinct #	
Street Address	City	State	Zip Code
Email Address	Home Phone Number () ()	Cell Phone Number () ()	

POLITICAL PARTY AFFILIATION: (State law requires you to select a political party.)

- Republican Democratic Other Party

Have you ever been convicted of a felony or election crime? Yes No

Do you have transportation? Yes No Will you work at any polling place? Yes No

Education Background (include highest grade completed or degrees held)

Employment Background (include current or last place of employment and type of work performed)

Past experience as an election inspector, if any (include name of jurisdiction or precinct #)

Languages other than English that you speak (of any)

Please rate your computer experience: None Novice Average Above Average Advanced

Are you comfortable using a laptop computer? Yes No

I certify that I am not a member or a known active advocate* of a political party other than the party identified above.

I further certify that the foregoing statements are true to the best of my knowledge and belief.

Signature of Applicant

Date

* A "known active advocate" of another political party is defined to mean a person who 1) is a delegate to the convention or an Officer of another party, 2) is affiliated with another party through an elected or appointed government position, or 3) has made Documented public statements specifically supporting by name another political party or its candidate in the same calendar year as the election at which the person will serve as an inspector. "Documented public statements" means statements reported by the news media or written statements with a clear and unambiguous attribution to the applicant.

ANY FALSE STATEMENTS MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT