



WHITEFORD TOWNSHIP | CLERK'S OFFICE | 8000 YANKEE ROAD, SUITE 100|
OTTAWA LAKE, MI 49267 | 734-856-5383 | FAX 734-854-1817
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ELECTION INSPECTOR APPLICATION

MUST be completed in your own handwriting in ink

FULL NAME _____ ARE YOU AT LEAST 18 YEARS OF AGE? _____

HOME ADDRESS _____ CITY _____ ZIP _____

MAILING ADDRESS (if different) _____

E-MAIL ADDRESS: _____

CELL PHONE _____ OTHER PHONE _____

REGISTERED IN PCT # _____ DRIVER'S LICENSE _____

POLITICAL PARTY AFFILIATION (you MUST check one to be eligible for appointment) Republican _____ Democratic _____

Have you ever been convicted of a crime? _____ Have you ever had a criminal case expunged? _____

If you have answered yes to any of the above questions, list the details of these incidents including infraction/crime, location, police agency and approximate date:

Educational Background (include highest grade completed or degrees held)

Please rate your computer experience (circle number) (None) 1 2 3 4 5 (High)
Are you comfortable using a laptop computer? YES _____ NO _____

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) _____

Can you easily and reliably show up for work? YES _____ NO _____ Willing to work 6:30 am to 9 pm YES _____ NO _____

I hereby 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 there are no willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions. I understand that any omission or false statements on this application shall be sufficient cause to be disqualified from being employed as an Election Inspector.

I further understand that Whiteford Township may conduct a basic background check which may include the following queries: a criminal history check, driving record check and check for contacts with law enforcement. I duly authorize Whiteford Township to conduct these queries. I understand that failure to authorize these queries will result in the rejection of my application. I understand that these queries will remain confidential and are not subject to release. I understand that the results of these inquiries remain the sole property of Whiteford Township. I understand that they are required due to the confidential nature of voter information provided and available to Election Inspectors.

Applicant Signature _____

Date _____

*A know 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 candidates 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.