July 18th a.m. [] July 19th a.m. []

## **State of Michigan Election Inspector Application** <sup>July 18th p.m.</sup> [] July 19th p.m. [] (Complete in your own handwriting and return to your local City/Township Clerk - find your local Clerk at mi.gov/vote)

personal information			
Full Name			
Full Name//////			
Home Address			
Phone #'s Home:			
Registered in City or Township of			
County of			
Political Party Affiliation ( <b>REQUIRED</b> ; mu			not be Independent):
□ Republican □ Democratic □ Liberta	-		-
Have you ever been convicted of a felor	ny or election crime	P 🗖 Yes	🗖 No
education and experience informatior	า		
Education Background (include highest gr	ade completed or de	gree held)	
Employment Background (include current	or last place of emp	loyment and type c	or work performed)
Languages other than English that you spe Please rate your computer experience (da			
1 = not experienced, 5 = very experienced			
	<b>2 3</b>	<b>4 5</b>	
Past experience as an election inspector, if any (include name of jurisdiction)			
Do you have transportation? Will you work at any polling place? Ye		blain:	
signature and certification			
I CERTIFY THAT I am not a member or a kno above. I FURTHER CERTIFY THAT the forego			
Signature of Applican	it		// Date
* A "known active advocate" of another political part another party; 2) is affiliated with another party thro statements specifically supporting by name another person will serve as an inspector. "Documented pul with a clear and unambiguous attribution to the appl	bugh an elected or appointe political party or its candid blic statements" means sta	ed government position o ates in the same calenda	r; 3) has made documented public r year as the election at which the

ANY FALSE STATEMENTS MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT.

Approved by State Director of Elections (August 2017)