



ELECTION WORKER APPLICATION 2024

QUALIFICATIONS:

- I. Are you a registered voter of Flathead County? Yes No
- II. Are you a candidate, spouse, child, parent, or sibling of a candidate or a candidate's spouse or the spouse of any of these in a precinct where the candidate's name appears on the ballot for anything other than a precinct office? Yes No
- III. Are you interested in working as paid worker or volunteer? Paid Volunteer
Paid workers must provide a copy of their SSN card for payroll purposes only.

APPLICANT INFORMATION:

Party Affiliation Constitutional Democratic Green Independent Libertarian Republican No Preference _____

Legal Name _____ Birthdate _____

Physical Address _____ City & Zip _____

Mailing Address _____ City & Zip _____

Email Address _____ Home Phone _____

Cell Phone _____

Emergency Contact Name _____ Emergency Contact Phone _____

1. Position(s) you are willing to work (check all that apply) Resolution Board Absentee Board Count Board Poll Runner
 Greeter Office Support

Resolution Board – Teams of three that resolve ballots that need to be reviewed and counted.

Absentee Board – The team that prepares absentee ballots for mail-out and works Election Day to separate voted ballots from envelopes.

Count Board – The team that works with the tabulators for counting voted ballots the day before the election and Election Day.

Poll Runner – Teams of two that travel among select polling locations to help replenish supplies and collect absentee ballots.

Greeter – Individuals at polling locations that will direct voters on which precinct they are, what table to go to, etc.

Office Support – This can be either part of the Registration Team or Absentee Ballot Team in the office.

These roles require multiple days/weeks availability prior to and on Election Day.

2. Please select the election date(s) that you are available to work:

Primary Election Day, Tuesday, June 4, 2024

General Election Day, Tuesday, November 5, 2024

I certify that I am a registered elector of Flathead County; that I am physically and mentally able to perform and complete assigned tasks; if I become a candidate or immediate family member of a candidate in the precinct in which I am serving, I will notify the Election Department immediately for replacement. [M.C.A. 13-4-107]

SIGNATURE _____ **DATE** _____