



Election Inspector Application

PRINT Name: _____
(Last) (First) (Middle Initial)

Address: _____

Phone: Home _____ Work _____ Cell _____

Email: _____

Date of Birth: _____

Any other Alias name (maiden): _____

Explain briefly why you would like to become an Election Inspector. List any experience you feel may help you as an Inspector:

I prefer to be: (mark your preferences, please)

- APPOINTED (Work every election, same poll)
- ALTERNATE (Work only when called, various polls)
- SUBSTITUTE (Called at short notice to fill-in at a polling location)
- PART-TIME (Split shift, either a.m. or p.m., in any district)

Please indicate if you prefer payment as an Election Inspector or to volunteer your service.

Paid (Training / Election Day) Volunteer

I certify that I am a U. S. citizen, at least 18 years of age, and a resident of the Town of Grand Chute.

Signature

Today's Date

Please return to: *Grand Chute Town Clerk, 1900 Grand Chute Blvd., Grand Chute, WI 54913-9613*

Questions? Call 920-832-5644