State of Michigan Election Inspector Application (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 | |
| Date of Birth/ Email Address | |
| Home Address | |
| Phone #'s Home: Work: | Cell: |
| Registered in 🗖 City or 🗖 Township of | Pct # Ward # |
| County of | |
| Political Party Affiliation (REQUIRED ; must be a recognized state party & may <u>not</u> be Independent): | |
| 🗖 Republican 🗖 Democratic 🗖 Libertarian 🗖 U.S. Taxpayers 🗖 Green 🗖 Natural Law 🗖 Working Class | |
| Have you ever been convicted of a felony or election crime | ? 🗆 Yes 🗆 No |
| education and experience information | |
| Education Background (include highest grade completed or degree held) | |
| | |
| Employment Background (include current or last place of emp | ployment and type or work performed) |
| | |
| | |
| Languages other than English that you speak (if any) | |
| | |
| Please rate your computer experience (data look-up, database processing, creating .pdfs, etc.): 1 = not experienced, 5 = very experienced | |
| | 2 / / / / / / / / / / / / / / / / / / / |
| | |
| Past experience as an election inspector, if any (include name of jurisdiction) | |
| | |
| Do you have transportation? | |
| Will you work at any polling place? 🗖 Yes 🗖 No If not, ex | xplain: |
| | |
| signature and certification 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 t | |
| | 1 1 |
| 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 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. | |

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

Approved by State Director of Elections (August 2017)