



SOMERSET COUNTY BOARD OF ELECTIONS

PO Box 3000, Somerville, New Jersey 08876-1262

Telephone: (908) 231-7086 (908) 231-7089 Fax (908) 231-9465



Poll Worker Application

Please print clearly in ink

1. _____
First Name Middle Last Name

2. _____
Address City Zip Code

3. _____
Middle Address (if different then above)

4. _____
Home Telephone # Cell Phone #

5. _____
Social Security # (Mandatory) Email Address

6. Are you a Registered Voter? Yes No

7. Have you ever served as an Election Board Worker? Yes No

8. Would you accept assignment to another town in our county?
If you checked yes, please list below what town(s) you prefer?

9. State the Political Party to which you belong? _____

10. Do you speak any other language in addition to English?
If you checked yes, what language(s)? Yes No

Signature

Date

Please mail or fax this completed form to the address above.

Note: Candidates for any elected office CANNOT serve as Poll Workers.

****** COUNTY EMPLOYEES CANNOT SERVE AS POLL WORKERS. ******