TOWN'S SEAL
TOWN OF SOUTHAMPTON

Election Worker Application

Please complete all information and return to:

By Mail: Office of the Town Clerk: 210 College Highway, Southampton, MA 01073
By Fax: 413-527-1352
Or by Email as a scan or attachment to: townclerk@townofsouthampton.org

Name:_____
First Middle Last

HomeAddress_____
Street Town Zip

Home Phone: _____ Cell Phone: _____

Email Address_____

Political Party: _____

Are you registered to vote in Southampton? Yes □ No □
Have you ever served as an Election Worker? Yes □ No □

If yes, for how long? _____ Where? _____ What role? _____

Are you available to work on Tuesdays when Elections are held?	Yes □	No □
Are you available to work on Saturdays if an Election is held?	Yes □	No □
Are you able to work on Election Day from 7:00 am-1:00pm?	Yes □	No □
Are you able to work on Election Day from 7:00 am – close of polls? (Different shifts)	Yes □	No □
Are you able to work at night?	Yes □	No □

How did you hear about becoming an Election Worker? _____

_____

I certify that the information given above is true and complete.

_____ Approved _____
Signature Date

2022