

State of Delaware Election Officer Application

for College students who are 16 or 17 years old and will not be 18 years old before November 6, 2018.

Use this form to apply to work at the polls as an election officer for the Department of Elections in the county in which you live or where you are enrolled in a college or university.

Print clearly in blue or black ink.

1. Who are you?

Last name		Suffix (Jr., II)	
First name		Middle name	
Social Security Number (required for payment)	_____ - _____ - _____	Birth date (MM/DD/YYYY)	/ /

2. What is your CURRENT address?

Street address			
Apt/Lot/Unit #	Development		
City/Town	State	DE	Zip Code
County where you live	<input type="checkbox"/> New Castle County	<input type="checkbox"/> Kent County	<input type="checkbox"/> Sussex County
Mailing Address if different than above			

College or university you attend	
Remarks/Comments	

3. What is your contact information? This is so election officials can reach you about your application.

Telephone number	Email address
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4. Please indicate the elections you would like to work. You can request to work all elections.

In order to participate in this element of the 2018 College Student Poll Worker program, you must meet the qualifications in item 5 below.

- Primary Election (September 6, 2018) General Election (November 6, 2018)

5. You must read and sign this statement.

I hereby swear or affirm that:

- I am a citizen of the United States and domiciled in Delaware,
- I am at least 16 years of age on or before November 1, 2018, and won't be 18 on or before November 6, 2018, and
- I am enrolled as half-time or greater student in the college or university noted in item 2 above.

Sign here X

Today's date
(MM/DD/YYYY)

This information is for official use only. Any unauthorized release may be punishable by law.

Previous editions are obsolete.

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6. You must have a Dean or faculty member of the College or University you attend sign below to verify that you are enrolled as a half-time or greater student.

Dean/Faculty Member	X	Today's date (MM/DD/YYYY)
Title		

7. Submit your application.

- Please submit your application promptly by email, fax or mail.
- Return the completed form to the Department of Elections Office in the county in which you live or attend school if you want to work in that county.
- You will receive notification of your assigned position and work location from your County Office prior to each election.

NEW CASTLE COUNTY OFFICE
820 N FRENCH ST SUITE 400
WILMINGTON DE 19801-3531
Phone: (302) 577-3464
FAX: (302) 577-6545
electionofficer@state.de.us

KENT COUNTY OFFICE
100 ENTERPRISE PL SUITE 5
DOVER DE 19904-8202
Phone: (302) 739-4498
FAX: (302) 739-4515
pollworkerkc@state.de.us

SUSSEX COUNTY OFFICE
119 N RACE ST
PO BOX 457
GEORGETOWN DE 19947-0457
Phone: (302) 856-5367
FAX: (302) 856-5082
votesc@state.de.us

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Assigned ED-RD	Position	Remarks	Processed By