

Shelby Township Clerk's Office

52700 Van Dyke

Shelby Township, MI 48316

ELECTION INSPECTOR APPLICATION

*Note: This form must be updated every two years.

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Home Phone: () _____ Alternate Phone: () _____

Social Security: _____ E-mail Address: _____

Birth Date: / / _____ Political Party Affiliation: _____

Educational Background: _____

Employment Background: _____

Are you proficient with a computer? (Not required) _____

Emergency Contact Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apt. Number*

City *State* *ZIP Code*

Primary Phone: () _____ Alternate Phone: () _____

Relationship _____

I CERTIFY THAT I am not a member of or a known active advocate* of a political party other than the party identified above. I FURTHER CERTIFY THAT the foregoing statements are true to the best of my knowledge and belief

Signature of Applicant

Date

*A "known active activate" 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 to 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 election 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 ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT.