

Election Officer/Night Worker Application

Please Print Legibly & Complete the Entire Form

Your Legal Name:		Date of Bir	th:							
I am a U.S. Citizen:	Yes	No	No If no, are you a Legal Permanent Res U.S.?				ent of the	Yes	No	
I am a County	Yes	No	l am re	gistered	to vote in S	an Joaquin (County:	Yes	No	
Employee:										
Address:										
City:				Zip Co	de:					
Mailing Address: If different than residence address										
City:				Zip Code:						
Cell Phone:				Home Phone:						
Email:										
SSN: required List additional languages you speak & understand:										
I prefer to serve in:	Stockton	Mante	eca Lo	di	Tracy	Lathrop	Ripon	Escalon	Lockeford	
Election Officer			Election Worker			Election Night Worker				
during in-person voting on Election outdoo Day/Days. Courier			Drive-Up Democracy-Collect ballots at an outdoor drive-up location.				Pick-up/Receiving Center Staff			
			urier/Dro	ier/Drop Box Courier (must have valid iver's license and your own vehicle)				Warehouse/Election Night Workers		
I acknowledge that failure to provide information may delay my receiving a work assignment and/or pay.										
Signature Date										

Return to: Registrar of Voters Office, Precinct Operations							
By Mail:	PO Box 810, Stockton, CA 95201	By Email:	polls@sjgov.org				
By Fax:	(209) 468-9534	In Person:	44 N. San Joaquin St, Suite 350 Stockton, CA 95202				

For Staff Use Only							
Voter ID:	EO ID:	Initials					
Linked	ML	Scanned					