

Armstrong County, Pennsylvania
STUDENT POLL WORKER APPLICATION

APPLICANT APPLICATION

Election Day that Student is Applying for:	<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election
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Name:

Current Address:

City:	State:	ZIP Code:
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Date of Birth:	Email:
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Home Phone:	Cell Phone:
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HIGH SCHOOL INFORMATION

High School Name:

High School Address:

City:	State:	ZIP Code:
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Phone:	Email:
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Principal:	Phone:	Email:
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I UNDERSTAND THAT I MUST MEET THE FOLLOWING REQUIREMENTS TO BE ELIGIBLE FOR THIS PROGRAM:

- I must be at least 17 years of age at the time of the election.
- I must be a U.S. Citizen and a resident of Armstrong County at the time of the election.
- I must be in good academic standing.
- I must be recommended by a high school teacher.
- I must obtain written approval from my school principal.
- I must obtain the consent of my parent or legal guardian.
- I must provide my own transportation to and from the polling place.

SIGNATURES BELOW INDICATE REQUIREMENTS FOR THE PROGRAM ARE MET:

Signature of Student:	Date:
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I have discussed this program with my student. We assure the Armstrong County Bureau of Elections that, if appointed, my student will be at his/her appointed precinct at the appointed time. If unable to serve, my student will give at least two weeks notice and will provide proof of the reason for the cancellation.

Signature of Teacher:	Date:
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Student's GPA:

Signature of Principal:	Date:
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Printed Name:	Email:
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I give the student permission to work for the Election Day indicated.

Signature of Parent/Guardian:	Date:
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Printed Name:	Email:
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Emergency phone number on Election Day:

BUREAU OF ELECTIONS USE ONLY

Election District Assigned:

Return completed application by deadline to School Coordinator to receive assignment.