

# University of Kansas Election Worker Application

Are you:     \_\_\_ Faculty                             \_\_\_ Staff                             \_\_\_ Student

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

1. Are you willing to work in any precinct in the county? \_\_\_\_\_

2. Will you be able to provide a cell phone for use at the voting place?  
If yes please provide the number. \_\_\_\_\_

3. Do you need any special accommodations? Yes \_\_\_\_\_ No \_\_\_\_\_

Handicap Parking Space? \_\_\_\_\_ ADA Accessible Restroom? \_\_\_\_\_

Other? \_\_\_\_\_

4. Have you ever been convicted of a crime that may affect your ability to be an election worker? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list the date of the crime, where the crime occurred, and the nature of the crime.

\_\_\_\_\_  
\_\_\_\_\_

5. Please list a name and telephone number of someone we can contact in an emergency.

Contact #1: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact #2: \_\_\_\_\_ Phone: \_\_\_\_\_

I am able to work:             \_\_\_ August 7<sup>th</sup>                             \_\_\_ November 6<sup>th</sup>

“The information provided is complete and correct to the best of my knowledge. I understand that any incomplete, incorrect or false information furnished by me may void this application.”

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Send Completed Application to:  
Douglas County Clerk's Office  
1100 Massachusetts St. Ste 100  
Lawrence, KS 66044**