



Shasta County Clerk/Elections Department

Poll Worker Application

1. Applicant Information (Please print clearly)

First Name _____ Last Name _____

Street Address _____ Unit/Apt # _____ City _____ State _____ Zip Code _____

Mailing Address (if different) _____ Unit/Apt # _____ City _____ State _____ Zip Code _____

Phone Number _____ Cell Phone Number _____ Email Address _____

Do you have access to a vehicle? Yes No

Are you registered to vote in the state of California? Yes No

Are you a U.S. Citizen or a Legal Permanent Resident of the United States? Yes No

2. Skills and Experience (Please check all that apply)

What is your level of education?

High School Some College Undergraduate Advanced Degree

Election Experience

Professional Experience

Language Skills

Election Day Standby	<input type="checkbox"/>	Administration / Clerical	<input type="checkbox"/>	What other languages other than
Election Day Clerk	<input type="checkbox"/>	Customer Service	<input type="checkbox"/>	English are you fluent in?
Election Day Assistant	<input type="checkbox"/>	IT / Technical	<input type="checkbox"/>	
Election Day Inspector	<input type="checkbox"/>	Recruiting / Training	<input type="checkbox"/>	<input type="checkbox"/> Other _____
Election Day ROVER	<input type="checkbox"/>	Supervisory	<input type="checkbox"/>	<input type="checkbox"/> Other _____

3. Availability

Are you a regular county employee? Yes No

Are you available on Election Day from 6:00 am to 9:00 pm? Yes No

Are you able to attend the mandatory training? Yes No

Are you available to work outside of your neighborhood? Yes No

If Yes, how far? 5-10 miles 11-20 miles 21-30 miles 31-40 miles

4. Signature and Date

I hereby attest that the information provided is accurate and complete.

Sign: _____ Date: _____

5. Submission Instructions and Information

Return completed applications:

By Email: electionvolunteer@co.shasta.ca.us

By Fax: (530) 225-5454

By Mail or in Person: 1643 Market Street Redding, CA 96001

For any questions, call the Elections Department at (530) 225-5730