



Shelby County Election Commission STUDENT ELECTION OFFICIAL APPLICATION

Personal Information:

Name _____
Last First M.I.

Residence Address _____
Street City State Zip

Date of Birth _____ Social Security Number _____
mm/dd/yyyy xxx-xx-xxxx

Home Phone _____ Cell Phone _____

Email Address _____

Describe your level of computer experience. _____

Are you able to work a full day (6 am to 7:30 pm)? _____

Requirements for Student Election Officials:

- **Must be a U. S. Citizen**
- **Attending training workshop(s) before election**
- **Attain at least 17 years of age**
- **Voter registration (if 18 years of age or older)**
- **Permission of parent or legal guardian (if under 18 years of age)**
- **Permission from school officials (if during school hours)**

Signature of Student _____ Date _____

This section to be completed by a School Administrator

I, _____
Print Name Print Title

At _____, give approval for the above-named student to participate in Shelby County Elections and the Student Election Officials program.

Signature _____ Date _____

This section to be completed by a parent or guardian (if student is under the age of 18years)

I, _____, as the parent or legal guardian, give my permission for the above-named student to participate as a Student Election Official in Shelby County and the Student Election Officials program.

Signature _____ Date _____

Please Mail or Deliver To: Shelby County Election Commission
980 Nixon Dr.
Memphis, TN 38134
or Scan and Email To: pollworker@shelbycountyttn.gov

Office Use Only Do not Write Below This Line

Reg. Number _____ Precinct _____ Party _____