



**Election Worker Application  
2024-2025 Election Cycle**

**RETURN TO CITY HALL BY NOV 30, 2023**

**Applicant Information**

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Telephone No. \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**Are You a US Citizen?** Yes  No       **Have you ever been convicted of a felony?** Yes  No

*Answering "No" or not answering either question means you may only be assigned the position of Greeter.*

**Have you been an Election Worker for the City of Dodgeville in the past?**

- Yes
- No, I would be a new poll worker
- No, but have served as a poll worker elsewhere

**If yes, do you wish to remain on the election worker list for the 2024-2025 election cycle?**

- Yes, please keep my name on the list of potential poll workers.
- No, I wish to withdraw my name from the list of election workers.

*If no, please sign at the bottom and return this form so we can remove you from our list.*

**Are you a high school student who will be at least 16 by January 1, 2024?**

- Yes
- No, I will not be 16 by Jan 1, 2024, but I will turn 16 during the 2024-2025 election cycle
- No, I will not turn 16 during 2024-2025

**Do you need any special accommodations? Please specify.**

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**Are you affiliated or expect to be nominated by a major political party as potential poll worker?**

*You will be considered for the position regardless. This just provides us notice to watch for an appointment.*

- Yes
- No
- Unsure

**Which of the following Job Duties would you most interested in helping with during an election?**

*Please check all that apply. No position is guaranteed and you will be used where needed for each election.*

- Absentees (Processing absentee ballots using the new Badger Books)
- Ballots (Ensuring electors receive the correct ballot style on election day)
- Chief Election Inspector
- Greeter
- Poll Books (in 2024 we will be using Badger Books -- digital poll books)
- Machines (assisting with Express Vote Machines or Tabulators)
- Special Voting Deputy (Assisting with Voting in Care Facilities)

**Acknowledgement**

I agree that the information provided on this application is true and accurate to the best of my knowledge and ability.

**Signature**

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Applicant's Signature

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Date