

**DANVILLE ELECTION COMMISSION
BARBARA L. DREHER, EXECUTIVE DIRECTOR**

Date _____

Application to serve as a Student Judge of Election

Please print all answers in black ink only

I am applying as an election judge for the <input type="checkbox"/> Democrat Party <input type="checkbox"/> Republican Party <input type="checkbox"/> Either party		You will be placed in your own precinct or as close to home as possible PCT _____		Home Phone #	
Last Name		First Name		Middle Initial	
Home Address		Apt #		City	
Social Security Number		Birth Date		Emergency Phone #	
Do you speak a foreign language? Which? <input type="checkbox"/> yes <input type="checkbox"/> no		Do you have use of a vehicle? <input type="checkbox"/> yes <input type="checkbox"/> no			
School Name		School Address		School Phone #	

NOTICE TO APPLICANTS – PLEASE READ BEFORE YOU SIGN BELOW

This is a one-time-only application for the Student Election Judge Program. If you are unable to serve as an Election Judge, you must notify the Danville Election Commissioners in writing or by telephone at 554-1934. If you wish to serve in subsequent elections, a new application must be Completed and returned to the Danville Election Commission.

Oath: Under penalties as provided by law and by signature, I hereby certify that the information I have given is true and correct.

Signature of Applicant		Date
Signature of Parent or Guardian		Date
Signature of School Principle		Date