



Yuba County

Student Poll Worker Application

Fillable form available: www.yubaelections.org

DATE RECEIVED

REQUIREMENTS:

- ALL STUDENT APPLICATIONS MUST BE SIGNED BY A PARENT/ GUARDIAN AND A TEACHER.
- Be at least 16 years of age at the time of the election.
- Be a United States Citizen or lawfully admitted for permanent residence in the United States.
- Agree to work from 6:00 a.m. to approx. 9:30 p.m. on Election Day.
- Have reliable transportation to training and to the poll site on Election Day.
- Attend mandatory training (approximately 2.5 hours).
- Have a grade point average 2.5 or higher.
- Be cleared through Megan’s Law.

STUDENT INFORMATION	Name:	
	Address:	
	Mailing Address:	
	Home Phone #:	Cell Phone #:
	Email <i>(primary method of contact)</i> :	
	Indicate all areas you are WILLING to be assigned on Election Day:	Indicate your PREFERRED area to be assigned on Election Day:
	<input type="checkbox"/> Browns Valley <input type="checkbox"/> Brownsville <input type="checkbox"/> Loma Rica <input type="checkbox"/> Dobbins/OH <input type="checkbox"/> Marysville <input type="checkbox"/> Olivehurst <input type="checkbox"/> Plumas Lake <input type="checkbox"/> Wheatland <input type="checkbox"/> Hallwood <input type="checkbox"/> ANY	<input type="checkbox"/> Browns Valley <input type="checkbox"/> Brownsville <input type="checkbox"/> Loma Rica <input type="checkbox"/> Dobbins/OH <input type="checkbox"/> Marysville <input type="checkbox"/> Olivehurst <input type="checkbox"/> Plumas Lake <input type="checkbox"/> Wheatland <input type="checkbox"/> Hallwood <input type="checkbox"/> ANY
I certify I have met the legal requirements to serve as a Student Poll Worker.		
Student Signature: _____ Date: _____		

PARENT PERMISSION	Name: _____ Phone #: _____	
	I give permission for my child to serve as a Student Poll Worker.	
	Parent Signature: _____ Date: _____	

TEACHER PERMISSION	Name: _____ Email: _____	
	High School: _____ GPA: _____	
	I certify that, to the best of my knowledge, the above named student meets the requirements to serve as a Student Poll Worker.	
Teacher Signature: _____ Date: _____		

FOR OFFICIAL USE ONLY			
Cleared Megan’s Law	Date: _____	By: _____	Precinct: _____ Position: _____

Completed applications can be returned by:

Mail: Yuba County Elections, 915 8th Street, Suite 107, Marysville, CA 95901

Email: elections@co.yuba.ca.us (scan or take a picture and attach to email)

Fax: (530) 749-7854