



Election Clerk Application Form

NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK: _____ CELL: _____

E-MAIL ADDRESS: _____

POLITICAL PARTY:

DEMOCRATIC: ___ REPUBLICAN: ___ GREEN INDEPENDENT: ___

LIBERTARIAN: ___ UNENROLLED: ___

HAVE YOU EVER WORKED AT AN ELECTION? _____

IF YES, WHEN: _____ POSITION: _____

HAVE YOU EVER WORKED FOR THE TOWN OF FALMOUTH? _____

IF YES, WHEN: _____ DEPARTMENT: _____

ELECTION DAY PREFERENCE:

6:30 A.M.-2:00 P.M. _____

1:45 P.M. - CLOSING _____

(evening workers stay until all is wrapped up)

PLEASE RETURN COMPLETED APPLICATION TO
ELLEN PLANER -FALMOUTH TOWN CLERK

271 Falmouth Road, Falmouth Maine 04105 or eplaner@falmouthme.org