IMPORTANT INFORMATION — PLEASE READ CAREFULLY

HOURS OF WORK WILL BE FROM 5:00 A.M. until the poll site is fully closed and dismissed by coordinator

Election Law Section 3–400(6)
No person shall be certified or act as an election inspector or poll clerk who is not a registered voter and a resident of the county in which he or she serves, or within the city of New York, of such city, who holds any elective public office, or who is a candidate for any public office to be voted for by the voters of the district in which he or she is to serve, or the spouse, parent, or child of such a candidate, or who is not able to speak and read the English language and write it legibly.

- Interpreters and Accessibility Clerks earn a salary of $200 for working an Election Day, $25 for attending class and passing the exam.
- Inspectors, Poll Clerks and Information Clerks earn a salary of $200 for working an Election Day, $100 for attending a training class and passing the exam.
- Any worker who does not attend training class and pass the exam will not be assigned to work an Election Day.
- Any worker who does not work an Election Day will not receive payment for attending class.
- Any worker who does not work at the site to which they are assigned will not be paid.
- Applicants must be willing to travel within the borough.

Apply online at nyc.electiondayworker.com
Board of Elections in the City of New York
Poll Worker Application

Valid from July 15, (current year) ________ – July 14, (next year) ________

Are you a New York City Resident? ___Yes ___No
At least 18 years of age? ___Yes ___No

If No to either question, DO NOT CONTINUE. Please note, all incomplete applications will be returned.

Name __________________________________________ _________   _________   _________

(please print or type) first                  middle                 last                      suffix (Jr., Sr.)

Male  □ Female  □

Date of birth  ______ / ______ /_____

Home Address _______________________________________________________________________________________
	house #                                                     street                                                                                                          apt #

city                                                            state                                                          zip code                                   in care of /P .O. Box

Phone Number day: (_____) ______-________-______ night: (_____) ______-________-______ cell: (_____) ______-________-______

area code                                     ext.                             area code                                      ext.                        area code

Social Security # _______-_______-________            Email Address ________________________________________________________

FILL IN ONLY if you wish to have your paycheck mailed to a different address than the one listed above. Please provide the alternate address below and the dates it would be in effect.

Effective date: ______ / ______ /______ until ______ / ______ /______

Alternate Address ______________________________________________________________________________________

house #                                                     street                                                                                                          apt #

city                                                            state                                                          zip code                                   in care of /P .O. Box

ALL POLL WORKERS ARE REQUIRED TO ATTEND A MANDATORY TRAINING CLASS. THERE ARE NO EXCEPTIONS.

1. Are you currently or have you ever been an employee of New York City Government?
   If yes, please advise for which agency on the line below.
   YES □ NO □

2. Please check here if you are willing to work as an Interpreter, and in which language:
   □ Spanish* □ Chinese Mandarin** □ Chinese Cantonese** □ Korean*** □ Bengali*** □ Punjabi*** □ Hindi***

3. Do you hold an elected office paid for out of public money?
   If Yes, state the office in which employed on the line below.
   YES □ NO □

4. Are you a candidate, or the spouse, parent, or child of such a candidate, for any public office or party position to be contested at an upcoming election in the district in which you are applying for service?
   YES □ NO □

5. Are you a registered voter?
   [Note: A person convicted of a felony whose maximum sentence of imprisonment has not expired or a person adjudged incompetent by a court of law cannot register to vote (Elec. Law § 5-106).]
   YES □ NO □

6. Do you agree to take and subscribe to the oath of office as an Election Inspector, if you are appointed and notified thereof?
   YES □ NO □

2. If you are a registered voter, please check which party:  □ Democratic  □ Republican  □ Other ______________________
   (Interpreters and Accessibility Clerks do not have to be registered voters. However, to serve as an Inspector, Poll Clerk or Information Clerk you must be a registered voter appointed by the Democratic or Republican Commissioner of Elections.)

I SWEAR (OR AFFIRM) THE ANSWERS TO THE ABOVE QUESTIONS ARE TRUE.

Signature of Applicant: X __________________________________________ Date ______ / ______ /_____

NOTE: Any poll worker removed from office for cause shall forfeit the compensation earned up to the time of such removal.

*Spanish language assistance is offered city wide.
**Chinese is offered in New York, Kings and Queens Counties.
***Korean, Bengali, Hindi and Punjabi are offered in Queens County only.