



# San Bernardino County Elections Office

## 2018 County Employee Poll Worker Application

### 1. Applicant Information (Please print clearly)

\_\_\_\_\_  
 First Name Last Name Employee ID

\_\_\_\_\_  
 Street Address Unit/Apt # City State Zip Code

\_\_\_\_\_  
 Mailing Address (If different) Unit/Apt # City State Zip Code

\_\_\_\_\_  
 Home Phone Number Cell Phone Number Work Phone Number

\_\_\_\_\_  
 Home Email Address Work Email Address

Do you have access to a vehicle? Yes  No 
 Are you registered to vote in the state of California? Yes  No

Are you available to work outside of your neighborhood? Yes  No

If Yes, how far? 5-10 miles  11-20 miles  21-30 mile  31-40 miles

### 2. Skills and Experience (Please check all that apply)

What is your level of education? High School  Some College  Undergraduate Degree  Advanced Degree

Election Experience	Professional Experience	Language Skills
Election Day Clerk <input type="checkbox"/>	Administration/Clerical <input type="checkbox"/>	Chinese <input type="checkbox"/> Spanish <input type="checkbox"/>
Election Day Supervisor <input type="checkbox"/>	Customer Service <input type="checkbox"/>	Hindi <input type="checkbox"/> Tagalog <input type="checkbox"/>
Election Day Field Rep. <input type="checkbox"/>	IT/Technical <input type="checkbox"/>	Japanese <input type="checkbox"/> Thai <input type="checkbox"/>
Election Day Machine Tech. <input type="checkbox"/>	Recruiting/Training <input type="checkbox"/>	Khmer <input type="checkbox"/> Vietnamese <input type="checkbox"/>
Other: _____ <input type="checkbox"/>	Supervisory <input type="checkbox"/>	Korean <input type="checkbox"/> Other: _____ <input type="checkbox"/>

### 3. Departmental Information

\_\_\_\_\_  
 County Department Name Immediate Supervisor Name Immediate Supervisor Phone Number

By signing below, I tentatively approve this employee's application to serve as a County poll worker (contingent on the successful completion of training and selection to work) for the upcoming election.

\_\_\_\_\_  
 Department Head Name (Print) Department Head Signature

### 4. Compensation and Work Hours

**Clerks: \$115.** Payment includes compensation for completing Election Day assignment and for attending one training class.  
**Machine Clerks: \$130.** Payment includes compensation for completing Election Day assignment and for attending one training class.  
**Supervisors: \$180** plus mileage. Payment includes compensation for completing Election Day assignment and for attending two training classes.  
**Bilingual: \$10** additional payment. Paid to those specifically hired based on bilingual skills and who successfully completed bilingual testing.  
**Work Hours:** Workers are required to report to their assigned polling place at 6:00 a.m. and work the entire Election Day (approx. 9:00 p.m.).  
 County Employees will receive their regular county pay plus the appropriate training and Election Day compensation.

### 5. Submission Instructions and Information

Return completed applications:

- By Email: Scan or take a picture of the application and email to [pollworkers@sbcountyelections.com](mailto:pollworkers@sbcountyelections.com)
- By Fax: (909) 387-2022
- By Mail or in Person: San Bernardino County Elections Office, 777 E. Rialto Avenue, San Bernardino, CA 92415

For any questions, call the Elections Office at (909) 387-8300