



Forsyth County Voter Registrations and Elections

POLL WORKER AND EMERGENCY CONTACT FORM COVER SHEET

Please complete this form and return it by October 1, 2020

Mail to or Personally Deliver to:
Forsyth County Voter Registrations and Elections
1201 Sawnee Drive
Cumming, GA 30040

Office Hours: Monday to Friday 8:00 a.m. to 4:30 p.m.

OR

Scan and Email to: PollWorker@forsythco.com

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If you print the packet double sided – this
blank page makes it all work 😊



Promote the Vote...
Be a Poll Worker

POLL WORKER INFORMATION SHEET

Forsyth County
Registrations & Elections
1201 Sawnee Drive
Cumming, GA 30040
770.781.2118 ext.9
FAX 770.886.2825
Pollworker@forsythco.com
www.forsythco.com

Last Name _____ First Name _____

Primary Phone # () _____ - _____ Alternate phone # () _____ - _____

Address _____

City _____ Zip _____ Date of Birth _____

Email: _____

(An Email address is required for all poll workers)

Are you a Registered Voter? _____ Voting Precinct (if known) _____

Are you willing to work at any polling place in Forsyth County? Yes No If no, please explain: _____

Are you fluent in a language other than English? Yes No If yes, which language(s)? _____

Tell us a little about yourself: e.g. what is your current job, or, if retired, what was your job before retirement?

Do you have experience working with computers doing typing and/or data entry? Yes No

If you have worked at the polls in another county or state, please list where you worked and what position you held (e.g., Manager, Clerk, etc.) _____

I understand in order to be eligible to be a Forsyth County Poll Worker I must:

- Be 16 years of age or older
- Be able to read, write and speak the English Language
- Be a resident of Forsyth County, or a Forsyth County Government employee
- Be a judicious, intelligent and upright citizen of the United States of America
- Be able to attend mandatory Poll Worker training
- Not have been convicted of a felony (unless voting rights have been restored)
- Not be a candidate for an election, be an elected official or a close relative of any candidate
- Not be a spokesperson for a candidate, issue or party

I hereby certify that all of the above are true and correct.

Digital Signature

or

Type your signature

Signature _____

Date _____

Office use only:

Date of Acceptance _____ Training Date _____ Precinct Assigned _____



Forsyth County Voter Registrations and Elections

Elections Office Information Sheet

WHO AM I?

Last Name: _____

First Name: _____

Nickname, AKA: _____

Middle Name: _____

HOW CAN WE CONTACT YOU?

**Time I am
Available to work
on Election Day:**

___ Full Day (5:30am-8:30pm/later

___ AM Only (5:30am-1:30pm)

___ PM Only (12:30pm - 8:30pm)

___ Other Hours: _____

Email Address: _____

Primary Phone #: _____

Secondary Phone #: _____

Residence Address: _____

Mailing Address, if different: _____

IN CASE OF EMERGENCY

Emergency Contact # & Relationship: _____

WHEN DID IT ALL START?

Please check one:

I started being a Forsyth County Poll Worker in _____
YEAR

___ I wish to be a volunteer.

___ I wish to be paid.

___ I am a Forsyth County employee
and I have my supervisor's
permission to serve as a poll worker.

___ I am a student poll worker and
have my parent/guardian's
permission.