



2024 ELECTION JUDGE APPLICATION

Name (please print): _____

Address: _____

Street

City

State

Phone Number: _____

Email Address: _____ (Required)

Party Affiliation: Democratic-Farmer-Labor Party (DFL) Republican Party
 Grassroots-Legalize Cannabis Party Legal Marijuana Now Party
 Non-Affiliated

2024 Election Dates

March 5, 2024 Presidential Primary

Preferred shift for this election

- | | |
|---|--|
| <input type="checkbox"/> 6 am-close | <input type="checkbox"/> 6 am-2 pm |
| <input type="checkbox"/> 2 pm-close | <input type="checkbox"/> I will work any shift |
| <input type="checkbox"/> I am not available for this election | |

August 13, 2024 Primary Election

Preferred shift for this election

- | | |
|---|--|
| <input type="checkbox"/> 6 am-close | <input type="checkbox"/> 6 am-2 pm |
| <input type="checkbox"/> 2 pm-close | <input type="checkbox"/> I will work any shift |
| <input type="checkbox"/> I am not available for this election | |

November 5, 2024 General Election

Preferred shift for this election

- | | |
|---|--|
| <input type="checkbox"/> 6 am-close | <input type="checkbox"/> 6 am-2 pm |
| <input type="checkbox"/> 2 pm-close | <input type="checkbox"/> I will work any shift |
| <input type="checkbox"/> I am not available for this election | |

- I am interested in serving as a Head Judge (election judge experience preferred)
- I am interested in serving as a Healthcare Judge (assisting voters confined to nursing homes or long-term care residential facilities)

I am volunteering to serve **WITHOUT** pay and consent that I will not be paid for my training or any duties as an election judge on the dates that I have indicated my availability to serve as an election judge in the 2024 elections. **If you volunteer, then you do NOT need to fill out any of the payroll information.**

I want to serve as an election judge **WITH** pay (please complete next section)

THIS SECTION MUST BE COMPLETED IF REQUESTING PAY

Social Security Number: _____

Gender: Female Male

Marital Status: Single Married

Race:

- White Black or African American Hispanic or Latino Asian
 American Indian/Alaska Native Native Hawaiian/Other Pacific Islander
 Two or More Races

Beginning in 2024 all election judges wishing to be paid will receive their compensation through direct deposit. A confirmation of the deposit will be sent to the email address listed on other side.

Payroll Deposit

- Checking Account Savings Account
- You must attach either a voided check or confirmation from your financial institution that reflects your account and routing numbers. **A deposit slip is not acceptable.**

I want the city to take taxes out of my check and request a W-4

DATA PRIVACY ADVISORY: Some of the information you are asked to provide is classified as private. The purpose and intended use of this information is to pay you for your service as an Election Judge and will be provided to city departments involved in payroll processing. If you decline to provide the required information, we will not be able to process your payroll.

Election judges must meet state requirements:

- ✓ Must be a United States citizen.
- ✓ Must be an eligible voter in the State of Minnesota.
- ✓ Must be able to read, write and speak in English.
- ✓ Must not be the spouse, parent, stepparent, child, stepchild, sibling or stepsibling of any election judge serving in the same precinct or of any candidate in that election
- ✓ Must not be domiciled, wither permanently or temporarily, with any candidate on the ballot at that election.
- ✓ Must not be a candidate at that election.
- ✓ Must be a trained and certified election judge.

I certify I have read and comply with all the requirements listed above.

Signature

Date

Please return your completed form to:
Lynne Olson, City of Fergus Falls
112 West Washington Avenue, Fergus Falls, MN 56537
Email: lynne.olson@fergusfallsmn.gov Phone: (218) 332-5404