[Jurisdiction] Election Academy

APPLICATION

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  | | | |  |  |  |  |
|  |  | Last | First | | Middle |  |  |  |  |
| Address: |  |  | | | |  | Phone: |  |  |
|  |  | Street address | | | Apt/Unit # |  |  |  |  |
|  |  |  | | | |  | Email: |  |  |
|  |  | City | | State | Zip Code |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Are you a registered voter of [Jurisdiction]? | | |  | Yes  No | | |
|  |  |
| Why would you like to attend the [Jurisdiction] Election Academy? | | |  |  | | |
|  | | |  |  | | |
| What do you hope to learn about the election process? | | |  |  | | |
|  | | |  |  | | |
| What questions do you have about how officials prepare for and run elections? | | |  |  | | |
|  | | |  |  | | |
| Participants must be willing to attend all Election Academy classes and commit to completing the course requirements. There are no make-up classes.  Can you commit to attending all [six] classes? | | |  | Yes  No  [List all class dates here.] | | |
|  | | |  |  | | |
| What category best describes you?  Select one or more. | | |  | Candidate | Poll Worker | Voter |
| Media | Campaign staff/volunteer | Other: |
|  | | |  |  | | |
| How did you hear about the [Jurisdiction] Election Academy? | | |  |  | | |

If accepted, I agree to abide by all [Jurisdiction] Election Academy rules.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature: |  |  |  | Date: |  |  |