



City of New Berlin  
Community Relations/City Clerk's Dept.  
3805 South Casper Drive  
New Berlin, WI 53151-0921

**APPLICATION FOR POLLWORKER (ELECTION INSPECTOR)**

I, the undersigned, do hereby make application to the City Clerk of the City of New Berlin to serve as a Pollworker for the City of New Berlin Elections. I understand that by filling out this application does not ensure that I will be chosen and that I may be placed on a wait list if all positions are filled at the time of filing of this application.

**INSTRUCTIONS AND STATEMENT OF RESPONSIBILITY: PLEASE PRINT LEGIBLY. FAILING TO LIST VIOLATIONS, PROVIDING INACCURATE INFORMATION, OR OMITTING INFORMATION FROM THIS APPLICATION MAY BE GROUNDS FOR DENIAL.**

1. Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Maiden Name \_\_\_\_\_

2. Address: \_\_\_\_\_  
City State Zip

3. Do you reside in Waukesha County?  YES  NO

4. Date of birth: \_\_\_\_\_ Age \_\_\_\_\_ Phone # \_\_\_\_\_  
Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_

5. E-mail Address: \_\_\_\_\_ U.S. Citizen  YES  NO

6. Have you ever been convicted of a felony? (Please check one):  YES  NO  
If "Yes," provide Date, Nature of Offense and State where it occurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Have you ever been ticketed, charged or convicted of any violation of Federal, State or Local Laws?  
(Please circle one): YES NO  
If 'yes', provide all violations with City, Date, and Penalty imposed. Use back of form if necessary.  
\_\_\_\_\_  
\_\_\_\_\_

8. I hereby certify that all the information provided on this application is true and correct to the best of my knowledge. I give the City of New Berlin permission to conduct a background check to verify the information I have provided and authorize the release of all information regarding my record.

Signature of Application: \_\_\_\_\_ Date: \_\_\_\_\_

