



**NEWTON COUNTY BOARD OF ELECTIONS AND REGISTRATION**  
**POLL OFFICIAL INFORMATION FORM**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

\*Residential Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ \*Must be a resident of Newton County

Mailing Address (If different from above): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Previous Poll Experience: (If Yes, When & Where) \_\_\_\_\_ YES \_\_\_\_\_ NO

Position Applying For (check all that apply):

\_\_\_\_\_ Clerk \_\_\_\_\_ Assistant Manager \_\_\_\_\_ Manager

Posses the following skills: \_\_\_ Typing \_\_\_ Computers \_\_\_ Touch Screen Electronics  
\_\_\_ Customer Service \_\_\_ Able to lift 30 lbs.

***By signing your name your are stating, "I am at least 16 years of age, able to read, write and speak the English language, I do not hold a public office, nor am I related to a candidate whose name will appear on the ballot and I am a United States citizen".***  
***(GA ELECTION CODE 21-2-92).***

**SIGNATURE** \_\_\_\_\_

Return to: Newton County Board of Elections & Registration, P. O. Box 1274, Covington, GA 30014

***This form will be retained for two years from the date received.***

***FOR OFFICE USE ONLY*** VRID#: \_\_\_\_\_ Approved/Denied: \_\_\_\_\_

Received: \_\_\_\_\_ Home Precinct: \_\_\_\_\_ Referred By: \_\_\_\_\_

Assigned to: \_\_\_\_\_ Election: \_\_\_\_\_ Position: \_\_\_\_\_