

**CITY OF FLINT  
ELECTION INSPECTOR APPLICATION**

1101 South Saginaw Street, Room 201C • Flint, MI 48502 • (810) 766-7414

**Please Print. (Must be completed in your own handwriting in ink)**

Name in Full \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth ----/-----/------ Cell Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Registered in \_\_\_\_\_ City of \_\_\_\_\_ or the  
\_\_\_\_\_ Township of \_\_\_\_\_

County of \_\_\_\_\_ Length of Residence in County \_\_\_\_\_

Political Party Affiliation (to be eligible for appointment you MUST check one)

Republican \_\_\_\_\_ Democrat \_\_\_\_\_

Have you ever been convicted of a felony or election crime? (Please circle) YES NO

Education Background (includes highest grade completed)

\_\_\_\_\_  
\_\_\_\_\_

Employment Background (includes current or last place of employment and type of work performed)

\_\_\_\_\_  
\_\_\_\_\_

Past experience as an election inspector, if any (include name of jurisdiction) \_\_\_\_\_

Do you have transportation? \_\_\_ YES \_\_\_ NO

**I CERTIFY THAT I am not a member or a known active advocate\* of a political party other than the party identified above. I FURTHER CERTIFY THAT the foregoing statements are true to the best of my knowledge and belief.**

Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

*\*A "known active advocate" of another political party is defined to mean a person who 1) is a delegate to the convention or an officer of another party 2) is affiliated with another party through an elected or appointed government position or 3) has made documented public statements specifically supporting by name another political party or its candidates in the same calendar year as the elections at which the person will serve as an election inspector. "Documented public statements" means statements reported by the news media or written statements with a clear and unambiguous attribution to the applicant.*

**ANY FALSE STATEMENTS ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT**  
Approved by State Director of Elections