



CITY OF MELROSE Registrars of Voters

562 Main Street | Melrose, MA 02176 | Phone 781-979-4125
Email: Elections@cityofmelrose.org | Website: www.cityofmelrose.org/elections

REGISTRARS
Brigid Alverson
Francis X. Wright
open

CITY CLERK
Kristin Foote

**ELECTIONS
ADMINISTRATOR**
Honey Rossi

Election Worker Application

Contact Information				
Last Name:		First:		MI:
Street Address:			Apt/Unit #:	
City:		State:	ZIP:	
Telephone:	Home:	Work:	Cell:	
Email Address:				
Date of Birth:		Occupation:		

Voter Information

Are you a Registered Voter in Massachusetts? Yes / No Are you affiliated with a party? Yes / No
 Democrat: Republican: Unenrolled: Other:
 Have you ever served as an Election Worker? Yes / No If Yes, for how many years If
 other than Melrose, where? If in Melrose? Ward: Precinct:
 In what capacity? (Number of Years) Warden Clerk Inspector
 Ability to read and write English? Yes / No Do you speak a foreign language? Yes / No
 If yes, which (including Sign Language):
 Would you walk, drive a car or use public transportation on election day? Walk / Car / Public

Important Information - Hours and Compensation

Hours of Work will be from approximately 6:00am – 9:00pm

- Wardens earn \$255.00 for the day.
- Clerks earn \$240.00 for the day.
- Inspectors earn \$225.00. for the day.

A mandatory training session for all poll workers is required prior to election day

Special Skills, Qualifications, Employment, or Volunteer Work

Please summarize any Special Skills, Qualifications, Employment, or Volunteer Work that will allow the Board of Registrars to compile available information to make their decision.

Our Policy

The Board of Registrars of Voters is dedicated to offering a team of election workers representative of the diverse Melrose community. The Board is committed to the principle of equal opportunity in the recruitment, selection, and employment of election workers and does not discriminate against individuals on the basis of race, creed, color, sex, sexual orientation, gender identity, religion, marital or family status, political belief, age, veteran or military status, ancestry, source of income, national or ethnic origin, or any disability that does not prohibit the performance of essential job functions.

Appreciation and Statement

Thank you for completing this application form and for your interest in working with the Registrars of Voters. We greatly appreciate you. Please note that submitting an application is not a guarantee that you will be hired as an election worker.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as an election worker, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Print Name: _____ Date: _____

Signature: _____

Official Use Only:
Date: _____ Elections Office: _____
Comments: