



Student Election Assistant Application

Gates County Board of Elections

I. Contact Information (Required)

Full Name: _____ Date of Birth: _____

Address: _____

Phone: _____ Email: _____

II. Eligibility (Required)

I certify that I am:

A citizen of the United States	YES <input type="checkbox"/>	NO <input type="checkbox"/>	16 years of age at the time of the election or primary for which I am applying	YES <input type="checkbox"/>	NO <input type="checkbox"/>
A resident of Gates County	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Enrolled in a secondary education institution, including home school as defined by GS 115C-563(a), with an exemplary academic record as determined by the institution	YES <input type="checkbox"/>	NO <input type="checkbox"/>

If you answer "no" to any of the above questions, you do not qualify.

Select how you wish to be compensated:

I wish to receive service credit*

I wish to receive monetary payment

** You must verify with your academic institution that working as a Student Election Assistant can count toward community service hours.*

I certify that I have read and understand the guidelines of the Student Election Assistant program, that I will follow them to the best of my abilities, and that the information provided above is correct.

Student Signature _____ Date _____

III. Enrollment Status Verification (Required)

Check one: Principal Director Home School Educator

Name: _____ School Name: _____

School Address: _____

Daytime Phone: _____ E-mail: _____

Signature _____

By my signature above, I am recommending this student to be a Student Election Assistant and certify that they are enrolled and have an exemplary academic record as defined by this institution.

IV. Parental Permission (Required)

Check one: Parent Legal Custodian Guardian

Full Name: _____ Phone: _____

Address: _____ E-mail: _____

Signature: _____

By my signature above, I am consenting for this student to be a Student Election Assistant.

Ways to return this application:

- 1) Scan and e-mail to elections@gatescountync.gov
- 2) Mail to PO Box 621, Gatesville, NC 27938