

Sedgwick County Election Office

Laura Rainwater, Election Commissioner

Student Election Worker Application

(A letter of recommendation from a teacher, counselor, or administrator is required)

There are a limited number of student election worker positions. The Election Office will notify students who have been selected by a letter of appointment.

Full Name:		Date of Birth:
Street Address:		
TELEPHONE:	(CELL) e text messages about training on my cell phone.	
Email Address:		
Name of School Attending:		
Graduation Year:	Election Date:	
I understand that in order to meet the legal requirements and to qualify as a participant in the Student Election Worker Program I must be:		
• at least 16 years of age at the time of the election at which I am serving as a member of the precinct board.		
• a re	esident of Sedgwick County, with parent/gu	uardian and school consent.
I agree to provide a copy of my appointment letter to the school office in order to obtain an excused absence for the day. I will promptly notify the Election Office if I am unable to obtain an excused absence. It is my responsibility to collect and complete any and all school assignments for the day.		
Signature of Stude	ent	Date
Parent/Guardian Name		
Emergency Contact Number		
Signature of Paren	t/Guardian	Date
Signature of Parent/Guardian Date Mail, fax, e-mail, or deliver in person to: Sedgwick County Election Office, 501 N Main, Suite 101, Wichita, KS 67203		

E-mail: <u>Voterinformation@sedgwick.gov</u> Web: www.sedgwickcounty.org/elections

Rev 01/2024