

Board of Election Supervisors Application Town Council Election May 7, 2024

Print your name:						
Print your addres	s:					
Print your email :						
Provide the best	phone number:					
Confirm your elig	ibility:					
I am a res	sident of the Town of Berwyn Heigh	ts				
I am regis	stered to vote in Maryland/ Town of	Berwyn Heights				
I do not c	urrently hold an elective office in th	e Town of Berwyn Hei	ghts			
I do not c	I do not currently have an immediate family member, who is a Town Council member or a candidate					
I do not c	urrently do business with the Town	of Berwyn Heights				
Indicate your pric	or election experience:					
State and	or county election? When and w	here?				
Town of E	Berwyn Heights election? Whe	en?				
Indicate your add	itional qualifications:					
In addition	n to English, I am fluent in the follow	wing languages:				
Read the fine pri	nt:					
 I am avail I am not a I will not a I will be connected ancestry and 	ment of Interest is filed with this ap able to work the polls on Election D able to attend the Town Council me affiliated with a current Town Councuse my position as an Election Judg ourteous, respectful and willing to a per national origin, physical or mentation formation or political affiliation.	ay, the first Tuesday in etings as needed, typic il election campaign ge to influence or affect assist all voters regard	n May, from cally in Febro at the result of less of race,	uary. of the election religion, sex, a	ge, ethnicity,	
Your Signature: _		D	ate			
Please return co	mpleted form to: Town Clerk, Towr	n of Berwyn Heights, 5	700 Berwyn	Road, Berwyn	Heights, MD 20740	
Office Use:	Date Received:	A	ssigned:	Yes	No	



Election Judge Applicant Statement of Interest

Please explain briefly (3-5 sentences) why you want to be an election judge for Town Council elections.						
Your Signature:		Date				
Name, Printed:						