

## EARLY VOTING / POLL WORKER APPLICATION

Please provide the following information and return the completed application to the Port Aransas City Secretary's Office via email fax or hand delivery to:

PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION CLEARLY

Francisca Nixon City Secretary 710 W. Ave A Port Aransas, TX 78373 Phone: (361) 749-4111 / Fax: (361) 749-4723 fnixon@cityofportaranas.org

<ul><li>Ms.</li><li>Mrs.</li></ul>					
Mr. Last Name	First Name	Ν	ΛI		
Home Address	Zip Code	Н	lome Phone		
Business Address	Zip Code	В	Business Phone		
Length of Residence in County:	City:		State:		
Qualified/Registered Voter of the City?					
Email Address: (required if available)					
_					
Have you ever worked as a Poll Worker in Port Aransas or Nueces County?					
If yes, please specify which one and approximate dates of service.					
Do you speak any languages other than English?					
If yes, please specify:					
Do you have any prior experience as an e in another county or jurisdiction?	election official	YES 🗖	NO		
If yes, please specify:					

Please check any position(s) you are willing to work:

- **D** Early Voting Clerk
- **D** Early Voting Ballot Board
- Emergency Election Judge / Clerk

Applicant's Signature

Date

Texas Driver's License Number

Date of Birth (DOB)

## **DPS Computerized Criminal History (CCH) Verification**

(AGENCY COPY)

\_\_\_\_\_, acknowledge that a Computerized Criminal

APPLICANT or EMPLOYEE NAME (Please print)

I,

History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on <u>name and DOB</u> identifiers. (This is not a consent form, but serves as information for the applicant.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is not allowed to discuss with me <u>any</u> CHRI obtained using the <u>name and DOB</u> method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the <u>name and DOB</u> search.

In order to complete the fingerprint process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at <u>www.dps.texas.gov/Crime Records</u> *Information/Review of Personal Criminal History* or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

## (This copy must remain on file by this agency. Required for future DPS Audits)

Signature of Applicant or Employee (optional)		
Date		
Agency Name (Please print)		
Agency Representative Name (Please print)		
Signature of Agency Representative		

Please: Check and Initial each Applicable Space				
CCH Report Printed:				
YES NO	initial			
Purpose of CCH:				
Empl Vol/Contractor	initial			
Date Printed:	initial			
Destroyed Date:	initial			
Retain in your files				

Date

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