



Gordy Hulten
Champaign County Clerk
Champaign, Illinois

Voter #: _____
Date of Class: _____

Refresher Course Requested: Yes No

1776 E Washington St.
Urbana, IL 61802

Vital Statistics: 384-3720
Elections: 384-3724
Fax: 384-1241

Deputy Registrar Application

PLEASE PRINT: LEGIBLE PRINTING IS ESSENTIAL FOR ALL VOTER REGISTRATION.

Name (Last, First, Middle): _____ Date: _____

Address: _____ City: _____

Home Phone: _____ Business Phone: _____

E-mail Address: _____

Occupation: _____

Employer's Name: _____

Business Address: _____

Last four digits of Social Security # or complete Illinois Driver's License #: _____

I am affiliated with:	Name & Address of Organization
<input type="checkbox"/> Labor Union	_____
<input type="checkbox"/> Library	_____
<input type="checkbox"/> School	_____
<input type="checkbox"/> Civic Organization	
<input type="checkbox"/> Business	
<input type="checkbox"/> I am not affiliated with any organization.	
<input type="checkbox"/> Precinct Committeeman If yes, what precinct and party? _____	
Are you interested in working Voter Registration Drives (4 hour shift)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you available during the day to register persons? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Where would you be willing to work? _____	
Mileage radius from your home? _____	
Would you be willing to register people at their home? <input type="checkbox"/> Yes <input type="checkbox"/> No	

You will be notified in advance as to the date and room location of the class. Please direct questions to the County Clerk's office at 384-3724.

I have carefully read the job descriptions and class guidelines. I am willing to take the necessary training and do the job to the best of my ability.

Written Signature