



2026 Election Inspector Information Form

Please print clearly.

Name: _____

Address: _____

Cell Phone Number: _____

E-mail Address: _____

Preferred Method of Contact: ☐ E-mail ☐ Phone

I am:

I am available to help on the following dates (check all that apply):

- ☐ Training Day: Friday, October 16, 2026
- ☐ Early Voting: Saturday, October 24 – Sunday, November 1, 2026
- ☐ Election Day: Tuesday, November 3, 2026 (*General Election*)
- ☐ Not available to help with any 2026 elections
- ☐ Not able to help with future elections – take me off the list

I am interested in (check all that apply):

- | | |
|---|---|
| ☐ Election Day Precinct worker | ☐ Electronic Poll Book (EPB - computer) |
| ☐ Absentee Counting Board | ☐ Data entry/filing in the office |
| ☐ Receiving Board | ☐ Assisting with Absent Voter Ballot mailing |
| ☐ Chair or Co-Chair | ☐ Help wherever I am needed |

**Please complete this form & return it to the Clerk as soon as possible
to be considered for the November 3, 2026 election.**

E-mail: elections@comstockmi.gov

Mail: P.O. Box 449, Comstock, MI 49041

Drop off: 5858 King Highway

State of Michigan Election Inspector Application

Clear Form

Return this form by mail to Comstock Township Clerk's Office, P.O. Box 449, Comstock, MI 49041
or by email to clerk@comstockmi.gov

personal information

Full Name _____

Date of Birth ____/____/____ Email Address _____

Home Address _____

Phone #'s Home: _____ Work: _____ Cell: _____

Registered in ☐ City or ☐ Township of _____ Pct # _____ Ward # n/a

County of Kalamazoo

Political Party Affiliation (**REQUIRED**; must be a recognized state party & may not be Independent):

☐ Republican ☐ Democratic ☐ Libertarian ☐ U.S. Taxpayers ☐ Green ☐ Natural Law ☐ Working Class

Have you ever been convicted of a felony or election crime? ☐ Yes ☐ No

education and experience information

Education Background (include highest grade completed or degree held) _____

Employment Background (include current or last place of employment and type or work performed)

Languages other than English that you speak (if any) _____

Please rate your computer experience (data look-up, database processing, creating .pdfs, etc.):

1 = not experienced, 5 = very experienced

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Past experience as an election inspector, if any (include name of jurisdiction) _____

Do you have transportation? ☐ Yes ☐ No

Will you work at any polling place? ☐ Yes ☐ No If not, explain: _____

signature and certification

I CERTIFY THAT I am not a member or a known active advocate* of a political party other than the party identified above. I FURTHER CERTIFY THAT the foregoing statements are true to the best of my knowledge and belief.

Signature of Applicant

____/____/____
Date

* A "known active advocate" of another political party is defined to mean a person who 1) is a delegate to the convention or an officer of another party; 2) is affiliated with another party through an elected or appointed government position or; 3) has made documented public statements specifically supporting by name another political party or its candidates in the same calendar year as the election at which the person will serve as an inspector. "Documented public statements" means statements reported by the news media or written statements with a clear and unambiguous attribution to the applicant.

ANY FALSE STATEMENTS MADE ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT.

Approved by State Director of Elections (August 2017)