

**Permission to Serve as a Board Worker for the  
Essex County Board of Elections  
as permitted by A-415 12/13/02**

**Student Information: (please print)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Parent/Guardian Information: (please print)**

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/ Guardian: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date: \_\_\_\_\_

**High School Information: (please print)**

Name of School: \_\_\_\_\_

Name of Representative: \_\_\_\_\_

Signature of Representative authorizing permission to work as a Board Worker and excusing him/her from school on the date of service.

\_\_\_\_\_  
Signature of Representative

**Transportation (to and from polling location) to be provided by: (please print)**

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_