



Employee #: _____
Start Date: _____
Job Title: _____
Department: _____

PERSONAL DATA SHEET - Election Judge

SOCIAL SECURITY # (required for payroll): _____

LAST NAME: _____ FIRST NAME: _____ M.I.: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ Home Cell PHONE #: _____ Home Cell

Gender: M/F Marital Status: S/M/D Race: Caucasian - African/American - Asian - Hispanic/Latino
Hawaii/Pacific Islander - American Indian/Alaskan Eskimo