

Election Workers Needed

The Knox County Election Commission conducts all city, county, state and Federal elections held within Knox County. Election workers are an important part of the electoral process, and we need the help of concerned citizens, just like you, to run honest elections. Democrats, Republicans, and Independents are all encouraged to apply.

Frequently Asked Questions

How much are election officials paid?

You are paid \$125 for Election Day.

Is training provided?

Yes, training is provided for everyone who will be working the election. As a new worker, you will attend a two-hour class, and you will be paid \$20 to attend this class.

What are the hours?

You will report to your assigned polling place no later than 7:30 in the morning, a half hour before the polls open on Election Day. You are required to stay at the polling place until the polls close at 8:00 p.m. and all the election equipment has been properly stored.

What do I need to bring?

You should bring food, beverages, and any medication you are required to take for the day. You may bring books and magazines.

Job Requirements

- You must be a registered voter in Knox County to work an election.
- You must be able to lift 50 lbs.
- You must be able to understand and follow written instructions.
- You must be willing to commit to work 14 hours on Election Day.
- You must be willing to come to training classes before each election.
- You will be cross-trained and expected to do multiple jobs.
- It would be helpful to be computer literate.
- It would be helpful to have an email address.

Government employees (Federal, state, city or county) cannot be election officials, nor may employees of KUB, CAC, or ORNL. *TCA §2-1-112*. School teachers and employees of higher education (University of Tennessee, Pellissippi, Knoxville College) may work. While there is no law against it, close relatives of candidates on the ballot will not be hired.

How to Apply

Please go to our website www.knoxvotes.org and fill out the application and W-4 form. High school students age 17 and over may work in elections; and the rules, pay and training are the same as for the others, though you must send in recommendation letters referenced at the web site. Then, mail this information to us. We will be in contact with you as classes are scheduled.



Knox County Election Commission

Room 218

300 Main Ave.

Knoxville, TN 37902

(865) 215-2480 Fax (865) 215-4239

www.knoxcounty.org/election

Election Official Application

Name _____
Last First M.I.

Address _____
Street City ZIP

E-Mail Address _____

Date of birth ____/____/____ Social Security # _____-_____-_____
Mo/Day/Yr

Home Phone _____ Work Phone _____ Cell Phone _____

Political Party – Check one: _____ Democratic _____ Republican _____ Independent

Employment Status

Employer or previous employer (if applicable) _____

Position or title _____

References

List two people who have knowledge of your character or ability (employers if applicable)

1. _____
Name Address Phone

2. _____
Name Address Phone

Have you ever served as an election official? _____

Are you able to work from 7:30 a.m. to 8:30 p.m. on Election Day? _____

Do you have reliable transportation? _____

Are you willing to travel outside your precinct to work? _____

Have you been convicted of, or plead guilty to, a crime which is a felony? _____

Are you related to a candidate or office holder? If so, who? _____

Do you work for Knox County other than Knox County Schools? _____

I understand that if appointed as an election official, I will be required to attend a training class held by the Knox County Election Commission.

Signature _____ Date _____

For Office use only – Don't write below this line

Voter Reg # _____ Ward # _____ Leg. District _____ Party _____

Election Workers

Please Provide the requested information below to process your employment

----- Cut here and give Form W-4 to your employer. Keep the top part for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate <small>▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</small>		OMB No. 1545-0074 2008	
1 Type or print your first name and middle initial.		Last name		2 Your social security number	
Home address (number and street or rural route)			3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <small>Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.</small>		
City or town, state, and ZIP code			4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>		
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)				5	
6 Additional amount, if any, you want withheld from each paycheck				6 \$	
7 I claim exemption from withholding for 2008, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶					
Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete. Employee's signature (Form is not valid unless you sign it.) ▶					
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)				Date ▶	
				9 Office code (optional)	
				10 Employer identification number (EIN)	

For Privacy Act and Paperwork Reduction Act Notice, see page 2. Cat. No. 102200 **Form W-4** (2008)

This information is requested solely for the purpose of determining compliance with Federal Civil Rights Law. By providing this information, you will assist us in assuring that this program is administered in a non-discriminatory manner.

Gender Male Female

Ethnicity (Select only one): Hispanic or Latino Not Hispanic or Latino

Race (Select one or more) American Indian or Alaska Native Asian
 Black or African American Native Hawaiian or Pacific Islander
 White