

Rhode Island Board of Elections Pollworker Application Cover Sheet

Under Rhode Island law, in order to serve as a poll worker you must:

- Be registered to vote in Rhode Island
- Be able to read the Rhode Island Constitution in English
- Be able to write your own name

- You cannot serve as a poll worker if you are a convicted felon.
- You cannot serve as a poll worker in a Primary if you are employed by the city/town in which you want to work. This rule is not applicable to the General Election.
- You will be paid. Pay varies by city/town.

You have to attend a training class for about 3 hours. You must be available to work the day of the election, from 6 a.m. until approximately 9:00 p.m. You cannot leave your assigned polling place for any reason; this includes voting, lunch, or dinner breaks.

If you desire to vote and are not assigned to work in your voting precinct, you must cast a mail ballot in the Board of Canvassers' office in the city or town where you are registered up until 4 p.m. the day before the election.

High School Students

You may be eligible to work at the polls if you are at least 16-years-old, a junior or senior, have at least a 2.5 GPA, and receive permission from school officials. Contact your Board of Canvassers for more information.

Complete the application and submit it to your local Board of Canvassers:

LOCAL BOARDS OF CANVASSERS

- | | | | |
|--|---|---|---|
| <p>Barrington Town Hall, 283 County Rd.,
Barrington, RI 02806</p> <p>Bristol Town Hall, 10 Court St,
Bristol, RI 02809</p> <p>Burrillville Town Hall, 105 Harrisville
Main St, Harrisville, RI 02830</p> <p>Central Falls City Hall, 580 Broad St.,
Central Falls, RI 02863</p> <p>Charlestown Town Hall, 4540 S. County
Trail, Charlestown, RI 02813</p> <p>Coventry Town Hall, 1670 Flat River
Rd., Coventry, RI 02816</p> <p>Cranston City Hall, 869 Park Ave.,
Cranston, RI 02910</p> <p>Cumberland Town Hall, 45 Broad St,
Cumberland, RI 02864</p> <p>East Greenwich Town Hall, PO Box 111,
East Greenwich, RI 02818</p> <p>East Providence City Hall,
145 Taunton Ave.,
East Providence, RI 02914</p> | <p>Exeter Town Hall, 676 Ten Rod Rd.,
Exeter, RI 02822</p> <p>Foster Town Hall, 181 Howard Hill Rd.,
Foster, RI 02825</p> <p>Glocester Town Hall 1145 Putnam Pike
PO Drawer 8, Glocester, RI 02814</p> <p>Hopkinton Town Hall, 1 Town House
Rd., Hopkinton, RI 02833</p> <p>Jamestown Town Hall, 93 Narragansett
Ave., Jamestown, RI 02835</p> <p>Johnston Town Hall, 1385 Hartford
Ave., Johnston, RI 02919</p> <p>Lincoln Town Hall, 100 Old River Rd.,
PO Box 100, Lincoln, RI 02865</p> <p>Little Compton Town Hall, PO Box 226,
Little Compton, RI 02837</p> <p>Middletown Town Hall, 350 East Main
Rd., Middletown, RI 02842</p> <p>Narragansett Town Hall, 25 Fifth Ave.,
Narragansett, RI 02882</p> | <p>New Shoreham Town Hall, PO Drawer,
220 Block Island, RI 02807</p> <p>Newport City Hall, 43 Broadway,
Newport, RI 02840</p> <p>N. Kingstown Town Hall, 80 Boston
Neck Rd., North Kingstown, RI 02852</p> <p>North Providence Town Hall, 2000
Smith St., North Providence, RI 02911</p> <p>North Smithfield Municipal Annex, 575
Smithfield Rd., North Smithfield, RI
02895</p> <p>Pawtucket City Hall, 137 Roosevelt
Ave., Pawtucket, RI 02860</p> <p>Portsmouth Town Hall, 2200 East Main
Rd., Portsmouth, RI 02871</p> <p>Providence City Hall, 25 Dorrance St,
Providence, RI 02903</p> <p>Richmond Town Hall, 5 Richmond
Townhouse Rd., Wyoming, RI 02898</p> <p>Scituate Town Hall, PO Box 328, North
Scituate, RI 02857</p> | <p>Smithfield Town Hall, 64 Farnum Pike,
Smithfield, RI 02917</p> <p>S. Kingstown Town Hall, 180 High St.,
Wakefield, RI 02879</p> <p>Tiverton Town Hall, 343 Highland Rd.,
Tiverton, RI 02878</p> <p>Warren Town Hall, 514 Main St, Warren,
RI 02885</p> <p>Warwick City Hall, 3275 Post Rd.,
Warwick, RI 02886</p> <p>W. Greenwich Town Hall 280 Victory
Highway, W. Greenwich, RI 02817</p> <p>West Warwick Town Hall, 1170 Main St,
West Warwick, RI 02893</p> <p>Westerly Town Hall, 45 Broad St.,
Westerly, RI 02891</p> <p>Woonsocket City Hall, P.O. Box 8,
169 Main St, Woonsocket, RI 02895</p> |
|--|---|---|---|



APPLICATION TO WORK AT THE POLLS

- REQUIREMENTS:**
- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Are you a registered voter in Rhode Island? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are you able to read the Constitution of the state in English? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are you able to write your own name? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered "No" to any of the questions above, you cannot serve as a poll worker. See the application cover sheet for important information about other requirements and restrictions. Contact your local Board of Canvassers for additional information.

First Name	Middle Initial	Last Name
Residence Address	City/Town	Zip
Mailing Address (if different)	City/Town	Zip
Date of Birth (MM/DD/YYYY)	Phone Number	E-mail Address
OPTIONAL: Please check the position you are interested in: <input type="checkbox"/> Warden/Moderator (Overall responsibility of the poll) <input type="checkbox"/> Clerk (Responsible for Ballots and paperwork) <input type="checkbox"/> Supervisor (Responsible for voter sign-in) <input type="checkbox"/> Greeter (Directs voters to proper line or poll) PPP <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/>		Have you ever worked the polls <input type="checkbox"/> Yes <input type="checkbox"/> No Are you a municipal employee <input type="checkbox"/> Yes <input type="checkbox"/> No Can you speak Spanish or other languages <input type="checkbox"/> Yes <input type="checkbox"/> No Other _____
Check all that apply		
I hereby swear and affirm that I have not been convicted, found guilty, pleaded guilty or nolo contendere, or placed on a deferred or suspended sentence, or on probation, for any crime which involves moral turpitude or which constitutes a violation of any of the election or caucus laws of this or any other state. I am not a candidate for public office in this election. I understand that my appointment as an election official may be dependent on me successfully passing a test based on material presented in a training class.		
Signature of Applicant		Date
DO NOT WRITE IN THIS SPACE (OFFICIAL USE ONLY)		
Party: DEM - REB - UNA		PW-23/2020

SUBMIT THIS FORM TO YOUR LOCAL BOARD OF CANVASSERS

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>	
	<p>2 Business name/disregarded entity name, if different from above</p>	
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of
U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding, later*.

Rhode Island Certification of Sole Proprietor, Sole Corporate Owner, Partner or Volunteer

I, (Name) _____ Social Security or FEIN# _____

Business _____

Address _____
 Board of Canvassers and Registration
 City Hall - 137 Roosevelt Avenue
 Pawtucket, Rhode Island 02860-2101

Board of Canvassers & Registrations
 City Hall - 137 Roosevelt Ave
 Pawtucket, RI 02860

hereby certify that I am a:

- Sole Proprietor with no employees
- Sole Owner of a Corporation with no employees
- Partner with no employees
- Volunteer Pursuant to RI GL 28-29-2 (2)

I, also certify that I am working under Contract for:

Insured Name _____ Policy # _____

Address _____

I declare that _____ is an independent contractor working under contract in accordance with the IRS guidelines (as stated on the reverse side of this form) therefore, is not eligible for nor entitled to Workers' Compensation or employers liability coverage or benefits pursuant to title 28, chapter 29, of the Workers' Compensation law of RI.

Under penalties of perjury I declare that I have examined this form and to the best of my knowledge it is true, correct and complete. I further acknowledge that false statements on the within document may subject me to criminal prosecution in accordance with sec. 28-38-17.3 of the R.I. Workers' Compensation law.

Independent Contractor

Witness

Signature _____ Date _____ Signature _____ Date _____

Insured

Witness

Signature _____ Date _____ Signature _____ Date _____

This form is to be filed with the insurance carrier on or before the day the above independent contractor begins work. Failure to do so will require inclusion of the appropriate remuneration for workers' compensation premium computation. The businesses signing this form shall also keep a copy.