

Questionnaire for Prospective Appointment as a Member, Director, or Deputy Director of the County Board of Elections

County Board of Elections

Position of Appointee

Appointee Name, Residence Address, and Other Information

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| <p>Courtesy Title <input style="width: 100%;" type="text"/></p> <p>First Name <input style="width: 100%;" type="text"/></p> <p>Middle Name <input style="width: 100%;" type="text"/></p> <p>Last Name <input style="width: 100%;" type="text"/></p> <p>Suffix <input style="width: 100%;" type="text"/></p> <p>Alias/Maiden Name <input style="width: 100%;" type="text"/></p> <p>Ohio Driver's License/ State ID Number <input style="width: 100%;" type="text"/></p> <p>Social Security Number <input style="width: 100%;" type="text"/></p> <p>Date of Birth (MM/DD/YYYY) <input style="width: 100%;" type="text"/></p> | <p>Street Address <input style="width: 100%;" type="text"/></p> <p>City <input style="width: 100%;" type="text"/></p> <p>State <input style="width: 50px;" type="text"/></p> <p>Zip Code <input style="width: 100%;" type="text"/></p> <p>Office Phone <small>(Numbers and hyphens only)</small> <input style="width: 100%;" type="text"/></p> <p>Home Phone <small>(Numbers and hyphens only)</small> <input style="width: 100%;" type="text"/></p> <p>Cell/Mobile Phone <small>(Numbers and hyphens only)</small> <input style="width: 100%;" type="text"/></p> <p>Email Address <input style="width: 100%;" type="text"/></p> |
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Previous Address Information

Have you resided at the same address for the past 10 years? If no, please provide the years of residence, city, and state for each previous address in the space below.

Question instructions: Please provide a response for 1-7 below. If you respond yes to any of the following questions, please provide details as requested. If more space is needed, please include further detail on a separate document.

1. Are you currently holding any elected office? If yes, please identify the office.

2. Are you currently holding any appointed office for which you must subsequently be elected? If yes, please identify the office.

3. Have you ever been convicted of a misdemeanor (other than minor-traffic related offenses) or a felony? If yes, please provide details of the conviction (what, when, where and final disposition).

4. Are there any circumstances which might present a conflict of interest with the administrative duties for you as a member, director or deputy director of the board of elections (see SOS ethics policy)? If yes, please identify.

5. Have you had any employment or interests in contracts with the board of elections within the last 24 months? If yes, please describe.

6. Have you ever been required, as a candidate or campaign treasurer, to file a campaign finance report with any board of elections or the Secretary of State? If yes, please list all campaigns, political parties, political action committees, etc. for which a campaign finance report was filed by you as a candidate or treasurer.

7. Has a campaign in which you were involved as a candidate or treasurer ever been the subject of a referral or complaint to the Ohio Elections Commission? If yes, please explain.

Business Address Information (prospective member appointees only)

Business Name

Address

Occupation

City

Phone

(Numbers and hyphens only)

State

Zip Code

Background Check Disclosure, Authorization and Release for Prospective Appointment as a Member, Director or Deputy Director of a Board of Elections

Section I: Disclosure

This form, which you should read carefully, has been provided to you because the Ohio Secretary of State's office may request investigative reports on you from various public and private reporting agencies. The Ohio Secretary of State's office will use any such report(s) solely for appointment and employment related purposes.

Investigative reports may be obtained from a background check vendor and/or public agencies and provided to the Ohio Secretary of State's office. The types of information that may be obtained include but are not limited to: Social Security Number verification, criminal records checks, public court records checks, driving record checks, state tax information, etc.

Any such reports are public records under Ohio's public records laws unless specifically exempt from disclosure.

Section II: Authorization and Release

I have carefully read and understand this Disclosure, Authorization and Release form. By my signature below, I consent to the release of investigative reports to the Ohio Secretary of State in conjunction with my application for prospective appointment as a Member, Director or Deputy Director of a county board of elections. I also authorize disclosure to the Ohio Secretary of State and/or the background check vendor of information concerning my motor vehicle history and standing, criminal history, state tax information and all other information the Ohio Secretary of State deems pertinent by any individual, corporation or other private or public entity, including without limitation to the following: law enforcement agencies; federal, state and local courts; motor vehicle records agencies; state tax agencies; and other applicable sources. I hereby release and hold the vendor and the Ohio Secretary of State and his employees and appointees harmless from any and all liability with respect to the investigations, verifications, and/or the use of any information relevant to my appointment or employment.

I understand that if I am appointed or hired, my consent will apply throughout the term of my appointment or employment to the extent permitted by law.

This Disclosure, Authorization and Release form, in original, faxed, photocopied, or electronic form, will be valid for any reports that may be requested by the Ohio Secretary of State.

I understand that providing any false information or omitting any material information on my resume and/or Questionnaire for Prospective Appointment as a Member, Director or Deputy Director of a County Board of Elections may be sufficient grounds for rejection of the application or termination of the appointment or employment whenever discovered.

Date Signed
(MM/DD/YYYY) _____

Prospective Appointee Signature **(Required)**

The **signed and completed form and resume** (member appointees only) must then be transmitted to the Ohio Secretary of State by **one of the following methods**:

Email to: MNewbern@ohiosecretaryofstate.gov

Mail to: Ohio Secretary of State
Attn: Myra Newbern, Elections Division
PO Box 2828
Columbus, OH 43216

NOTE: All prospective appointees as members of the board of elections must submit a résumé that includes educational and employment history.