



TEACHER TRANSMITTAL FORM

HIGH SCHOOL: Name _____
 Address: _____
 City: _____ Zip _____

TEACHER: Name: _____
 Contact Number: _____
 Fax Number: _____
 E-Mail Address: _____

NUMBER OF STUDENT NOMINATION FORMS SUBMITTED: _____

REMINDER: Be sure that you have reviewed the nomination forms to ensure:

- 1) Parent and student signature
- 2) Student meets requirements
- 3) Teacher signature
- 4) Student has provided all information so there is no delay in processing paychecks
- 5) Number all Nomination Forms according to the order in which they were received on the upper right hand corner of nomination form

Students will be notified by letters that have been placed on a board. It is possible that students on the "Waiting List" may not be placed. As vacancies occur, these students will be notified by letter or telephone.

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| RETURN TO: | Rose Mohamad San Joaquin County Registrar of Voters Student Pollworker Program PO BOX 810 Stockton CA 95201 OR FAX TO: 209-468-9534 |
| DEADLINE: | September 12, 2008 |