



Ketchikan Gateway Borough Office of the Clerk

1900 First Avenue, Suite 230

Ketchikan, AK 99901

Phone: (907) 228-6605

Fax: (907) 228-6697

Email: Elections@kgbak.us

YOUTH VOTE AMBASSADOR PROGRAM APPLICATION

Last Name	First Name	MI
Residence Address		
Mailing Address		
Phone:	Email:	
Date of Birth:	Social Security Number:	
Are you at least 16 years old? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Are you enrolled in public, private, or home school? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Please provide the name of your school:		
Have you previously served as a youth vote ambassador in Alaska? If so, where, and when?		
Is a candidate in the election your mother; mother-in-law; stepmother; father; father-in-law; stepfather; sister; sister-in-law; brother; brother-in-law; stepbrother; spouse; or person sharing your living quarters? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>The information on this application is true and correct to the best of my knowledge.</i>		
Applicant Signature _____		Date _____
Parent/Guardian Signature _____		Date _____
FOR OFFICE USE ONLY		
Received by:	Applicant's Precinct: _____	Database Entry: <input type="checkbox"/>
Notes:		

If you are interested in serving as an election official, please complete, sign, and return this application to the Borough Clerk's Office at the address listed above.