New York State Absentee Ballot Application	BOARD USE ONLY:
Please print clearly. See detailed instructions.	Town/City/Ward/Dist:
This application may only be used by a qualified voter who resides in a district with a system of personal registration. The application must either be personally delivered to your	Registration No: Party: Voted in office
 temporary illness or physical disability permanent illness or physical disability duties related to primary care of one or more duties have a primary care of one or more 	t of a Veterans Health spital rison, awaiting trial, awaiting jury, or in prison for a conviction see which was not a felony
Primary Election only General Election only Any election held between these dates: absence begins:/	Special Election only absence ends://
3. Iast name or surname	middle initial suffix
4. date of birth MM/DD/YYYY county where you live phone number (optional)	email (optional)
address where you live (residence) street apt city	state zip code
6. Intentionally Omitted by the School District	
	e in person at the office of the school district clerk up my ballot at the office of the school district clerk
street no. street name apt. city	state zip code
 8. I certify that I am a qualified and a registered (and for primary, enrolled) voter; and that the information in this application is true and correct and that this application will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn. Sign Here: X Date/ 	
	MM/DD/YYYY
If applicant is unable to sign because of illness, physical disability or inability to read, the following must be executed: By my mark, duly witnessed hereunder, I hereby state that I am unable to sign tion for an absentee ballot without assistance because I am unable to write by reason of my illned disability or because I am unable to read. I have made, or have the assistance in making, my main my signature. (No power of attorney or preprinted name stamps allowed. See detailed instruction Date/ Name of Voter: Mark: Mark: I, the undersigned, hereby certify that the above named voter affixed his or her mark to this application and under and I know him or her to be the person who affixed his or her mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and the stamps and the mark to said application and under the stamps and the mark to said application and under the stamps and th	n my applica- ess or physical rk in lieu of ons.) Note:The modifications to the instructions and Section 7 and the deletion of Section 6 were made by the school district to adapt the State Board of Elections
this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a mass statement, shall subject me to the same penalties as if I had been duly sworn. (signature of witness to mark)	

Board Use Only 2015 Absentee Ballot Application

Instructions

Who may use this school district absentee ballot application form?

This application is only to be used by a qualified voter who resides in a school district with a system of personal registration. Voters in districts without a system of personal registration must use a different form provided by their school district. Each person must apply for themselves. In order to qualify as a voter in a school district a person must be:

- A citizen of the United States.
- Eighteen years of age.
- A resident within the district for a period of thirty (30) days next preceding the meeting or election at which s/he offers to vote.
- No person shall have the right to register for or vote at any school district meeting or election who would not be qualified to register for or vote at an election in accordance with the provisions of section 5-106 of the Election Law.

Information for military voters

If you are applying for an absentee ballot because you will be absent from the school district on the day of election, budget vote or referenda due to military service do not use this application. You are entitled to special provisions if you file an application for a school district military absentee ballot. Contact your school district to receive the appropriate application form. A military voter is:

- A qualified voter of the state of New York who is in active military service or has been discharged from such service within thirty (30) days of the election, budget vote or referenda; or
- The spouse, parent, child or dependent of such a voter accompanying or being with him or her, if a qualified voter and resident of the same school district.

Where and when to return your school district absentee ballot application:

Applications should not be sent to the school district more than thirty (30) days in advance of the election. The application must either be personally delivered to your school district clerk not later than the day before the election if the ballot is to be delivered in person or must be received by the district clerk not later than seven (7) days before the election if the ballot is to be mailed to the voter.

The ballot itself must be delivered to the school district clerk by 5 PM on the day of the election in order to be canvassed.

When your school district absentee ballot will be sent:

Ballots will be sent not later than six (6) days prior to the election if the ballot is to be mailed. When an application is received in person later than seven (7) days before the election the clerk shall deliver the ballot when such applicant or agent designated by the applicant, appears in the district clerk's office.