Application for Absentee Ballot

Application must be received by the District Clerk at least 7 days before the election if the ballot is to be mailed to the voter, or the day before the election, if the ballot is to be delivered personally to the voter.

State of New York City or Town of) ss.:
County of	S
Ι,	being affirmed say:
I resideStre	eet number (if any) or town
and rural delivery route (if any)	
I am a qualified voter of the School District in whice age, a citizen of the United States and have or will	ch I reside in that: I am or will be on such date, over 18 years of l have resided in the district for thirty days next preceding such date.
because I am or will be on such day:	of the School District election for which the absentee ballot is requested the of the following subdivisions)
A patient in a hospital, or unable to appear personally	A. at the polling place on such day because of illness or physical disability.
Because my duties, occupation, business or studies will	B.
☐ 1. Where such duties, occupations, business or s description of such duties, occupation, business or s	studies are of such a nature as ordinarily to require such absence, a brief studies shall be set forth in such application:
such application shall contain a statement of the spe	ecial circumstances on account of which such absence is required.
I will be on vacation elsewhere on such day.	C. □
I expect that such vacation will begin on	Date
and end on	Date ,
and will be at the following named place or places.	
Name of Employer	Address
or self employed as a	Located at
or retired as of (date)	

D
I will be absent from my voting residence because
 ☐ I am detained in jail awaiting action by grand jury. ☐ I am awaiting trial. ☐ I am confined after conviction for an offense other than a felony.
E.
I am entitled to vote as an absentee voter in that I expect to be absent from the School District on the day of the School District election by reason of accompanying or being with the (check one) \square spouse, \square parent, \square or child of, and reside in the same household with a person qualified to apply in that such a person (check one) \square will be absent from the county of his residence due to his duties, occupation, business or studies and such absence is not caused by the fact that his regular daily place of business is located outside such county, or \square will be absent due to vacation, \square a patient at a hospital, \square detained in jail, \square confined due to illness or physical disability.
The person through whom I claim to be so entitled (check one) \square has \square has not applied for an absentee ballot.
I HEREBY DECLARE THAT THE FOREGOING IS A TRUE STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT IF I MAKE ANY MATERIAL FALSE STATEMENT IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOTS, I SHALL BE GUILTY OF A MISDEMEANOR.
Date Signature of Voter or Mark