

APPLICATION FOR ABSENTEE BALLOT

NEWBURGH ENLARGED CITY SCHOOL DISTRICT

Please print all information.

Return application to:

Mary Lou Botsford, District Clerk
Newburgh Enlarged City School District
124 Grand Street
Newburgh, NY 12550

The completed application must be received by the District Clerk at least seven (7) days prior to the vote if the ballot is to be mailed or the day before the vote if the ballot will be picked up personally by the voter.

I, _____, affirm the following information:

<u>NAME OF VOTER</u>	
<u>LEGAL RESIDENCE ADDRESS</u>	<u>MAIL BALLOT TO THIS ADDRESS</u>
<u>Street</u>	<u>Street</u>
<u>Town/City</u>	<u>Town/City</u>
<u>State/Zip</u>	<u>State/Zip</u>

I am or will be, on the day of the school district vote/election, a qualified voter of the Newburgh Enlarged City School District, over 18 years of age, a citizen of the United States, and have or will have resided in the district for 30 (thirty) days immediately preceding the date of vote/election.

Date of vote/election for which ballot is requested: _____

I will be unable to appear to vote in person on the day of the school district vote/election for which the absentee ballot is requested because I am, or will be on such day (check one):

a patient in a hospital, or unable to appear personally at the polling place on such day because of illness or physical disability.

because of my duties, occupation, business or studies, I will be required to be outside the county or city of residence on such day. (You must provide a brief description of such duties, occupation, business or studies. Where such duties, occupation, business or studies are not of such a nature as ordinarily to require such absence, please state the special circumstances which require such absence.)

(Brief Description)

because I will be on vacation outside the county or city of residence on such day. (Please state the dates upon which you expect to begin and end such vacation, the place or places where you expect to be on such vacation, the name and address of your employer, if any; if self-employed, a statement to that effect, or if retired, the date of retirement).

Vacation Dates (Begin/End)

Vacation Destination

(Name/Address Employer, Self-employed, or Retired)

(Date of Retirement)

– over –

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because I will be absent from my voting residence because I am or will be detained in jail awaiting action by a grand jury, awaiting trial or confined in prison after conviction for an offense other than a felony. (Please state whether you are detained awaiting action of the grand jury or are confined after conviction for an offense other than a felony.)

because I will be accompanying my spouse/child/parent who is or would be, if s/he were a qualified voter, entitled to apply for the right to vote by absentee ballot and I reside in the same household with such person. (Please state name, address and relationship of person referred to in this paragraph).

(Please also indicate the reason for the absence from the county of his/her residence: due to duties, occupation, business, studies, vacation, a patient in a hospital, detained in jail, confined due to illness or physical disability.)

(Please also indicate whether or not the person through whom I claim to be entitled has or 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 ballot, I shall be guilty of a misdemeanor.

Date

Signature of Applicant

Disclaimer: Absentee Ballot application submission via fax or email is not acceptable. Application with original signature is required.

Office Use Only: _____
Date Application Received