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 County of	ss.:
•	being affirmed say
I reside at	
and rural delivery route (if any)	Street number (if any) or town
I am a qualified voter of the School District age, a citizen of the United States and have I I am registered in the district.	t in which I reside in that: \Box I am or will be on such date, over 18 years of or will have resided in the district for thirty days next preceding such date
requested because I am or will be on such	on the day of the School District election for which the absentee ballot is day: ete one of the following subdivisions)
	A. 🗆
A patient in a hospital, or unable to appear disability.	personally at the polling place on such day because of illness or physical
	В. 🗆
Because my duties, occupation or business day.	will require me to be outside of the county or city of my residence on such
☐ 1. Where such duties, occupation or bu	siness are of such a nature as ordinarily to require such absence, a or business shall be set forth (description):
□ 2. Where such duties, occupation or buabsence, a statement must be given for the	siness are not of such a nature as ordinarily to require such special circumstances to account for such absence.
	С. 🗆
will be on vacation elsewhere on such day.	
	Date
and end on	Date
and will be at the following named place or p	places.
lame of Employer	Address
r self employed as a	Located at

D. L	
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 in a prison 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, ar reside in the same household with a person qualified to apply in that such a person (check one) \square will be absent fro the county of his residence due to his duties, occupation or business and such absence is not caused by the fact that h regular daily place of business is located outside such county, or \square will be absent due to vacation, \square a patient at 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 ballo	
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 FALSI STATEMENT IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOTS, SHALL BE GUILTY OF A MISDEMEANOR.	
Date Signature of Voter or Mark	