Application for Absentee Ballot

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

(Please Print)

State of New York
City or Town of    ss.: Ulster
County of Ulster

I, ____________________________________________________________________________, being affirmed say:

I reside at ____________________________________________________________________________

(Street Number and Name)

_____________________________________________________________________________________

(City, State and zip code)

I am a qualified voter of the School District in which I reside in that:

□ I am or will be on the date of the election/vote over 18 years of age, a citizen of the United States and have or will have resided in the District for thirty days next preceding such date. □ I am registered in the District.

I will be unable to appear to vote in person on the day of the School District election/vote for which the absentee ballot is requested because I am or will be on such day:

(Complete one of the Following)

A. □

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

B. □

Because my duties, occupation, business or studies will require me to be outside of the county or city of my residence on such day.

□ 1. Where such duties, occupation, business or studies are of such a nature as ordinarily to require such absence, a brief description of such duties, occupation, business or studies shall be set forth:

□ 2. Where such duties, occupation business or studies are not of such a nature as ordinarily to require such absence, a statement must be given for the special circumstances to account for such absence:
C. □

I will be on vacation elsewhere on such day.

I expect that such vacation will begin on ______________________ and end on ______________________

Date               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 residency 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/vote by reason of accompanying or being with the (check one) □ spouse, □ parent, □ child of, and reside in the same household with a person qualified to apply in that such a person (check one) □ will be absent from the county of his/her residence due to his/her duties, occupation, business or studies and such absence is not caused by the fact that his/her regular daily place of business or studies is located outside such count, or □ will be absent due to vacation, □ a patient at a hospital, □ detained in jail, □ confined due to illness or physical disability.

The person through whom I claim to be so entitled (check one) □ has □ 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