



Office of the District Clerk
1477 South Schodack Road
Castleton, NY 12033-1699

APPLICATION FOR ABSENTEE BALLOT
(PLEASE RETURN TO THE ABOVE ADDRESS)

STATE OF NEW YORK :
TOWN OF _____ : ss.:
COUNTY OF _____ :

I, _____, being affirmed say:
Name

I reside at _____
Address, City, State and Town

I am a qualified voter of the School District in which I reside in, that: I am or will be on such date, over 18 years of age, a citizen of the United States and have or will have resided in the district for 30 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 for which the absentee ballot is requested because I am or will be on such day:

(Complete one of the following subdivisions)

A.

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

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 (description):

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 _____ (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 resident 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 am a qualified voter and resident of the School District and expect to be absent from the School District on the day of the School District election by reason of accompanying or being with my (check one) spouse, parent, or child who is qualified to apply for the right to vote by absentee ballot 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, or will be absent due to vacation, a patient at a hospital, detained in jail, unable to appear at the polling place 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 STATEMENTS IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOTS, I SHALL BE GUILTY OF A MISDEMEANOR.

Date

Signature of Voter