Application for Absentee Ballot Pursuant to Sections 2018-a and 2018-b of the Education Law

Name:				
Addres	S:(Number and Street)			
	(Village/Town/City)		(State)	(Zip)
of the _	I, am or will be Scho	ol District, am ove	r 18 years of age,	a citizen of the United
I a	m / am not (check one) currently	y registered to vote	.*	
Date of	election or vote for which absentee	ballot is requested:	:	
	I will be unable to appear to vote is entee ballot is requested because I a	*	•	
	A patient in a hospital, or unable to illness or physical disability;	appear personally a	at the polling place	on such day because of
	Because of my duties, occupation, or city of residence on such day. business. Where such duties, occurequire such absence, please state required):	(Provide a brief apation of business	description of suc are not of such a	h duties, occupation or nature as ordinarily to
	Because I will be on vacation outs: the dates upon which you expect to expect to be on vacation, the name retired, a statement to that effect):	begin and end suc	h vacation, the pla	ce or places where your
	Because I will be absent from my awaiting action by the grand jury, offense other than a felony. (Pleas jury or are confined after conviction	awaiting trial or o	confined in prison are detained awai	after conviction for an

This information is only required in districts having a system of personal registration.

qualified vot	rill be accompanying my spouse/child/parent who is or would be, if he were a er, entitled to apply for the right to vote by absentee ballot. (Please state the name, relationship of person referred to in this paragraph):
and I understand tha	lare that the foregoing is a true statement to the best of my knowledge and belief, t if I make any material false statement in the foregoing statement of application for all be guilty of a misdemeanor.
Date	Signature of Voter
Please return to:	
District Clerk	School District
Address	