

SCHOOL DISTRICT ABSENTEE BALLOT APPLICATION

Please print clearly

This application may only be used for school district elections by qualified voters who reside in a school district. If the application requests the absentee ballot be mailed, the application must be received by the District Clerk not later than 7 days before the election for which the absentee ballot is sought. Otherwise, the application may be personally delivered to the District Clerk not later than the day before the election. Applications may not be submitted more than 30 days prior to the election. If you are qualified for absentee voting and issued an absentee ballot, the ballot itself must be received by the Saranac Central School District Clerk by 5:00 p.m. on the day of the election in order to be canvassed.

1	I am requesting, in good faith, an absentee ballot due to (check on reason): <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><input type="checkbox"/> Absence from county on election day <input type="checkbox"/> Temporary illness or physical disability <input type="checkbox"/> Permanent illness or physical disability <input type="checkbox"/> Duties related to primary care of one or more Individuals who are ill or physically disabled</div><div style="width: 45%;"><input type="checkbox"/> Resident or patient of Veterans Health Administration Hospital <input type="checkbox"/> Detention in jail/prison, awaiting trial, awaiting action by a grand jury, or in prison for conviction of a crime or offense which was not a felony</div></div>			
2	Absentee ballot(s) requested for the following school district election(s): <div style="display: flex; justify-content: space-between;"><div style="width: 30%;"><input type="checkbox"/> Annual election and budget vote</div><div style="width: 30%;"><input type="checkbox"/> Budget re-vote</div><div style="width: 30%;"><input type="checkbox"/> Special district election or referendum</div></div> <input type="checkbox"/> Any election held between these dates: absence begins: ____/____/____ absence ends: ____/____/____			
3	Last name or surname	First Name	Middle Initial	Suffix
4	Date of Birth	School District where you reside	Phone Number (optional)	Email (optional)
5	Address where you live (residence) street City State Zip Code			
6	Delivery of School District Absentee Ballot (check one) <div style="margin-top: 10px;"><input type="checkbox"/> Deliver to me in person at office of school district clerk <input type="checkbox"/> I authorize (give name): _____ to pick up my ballot at the office of the school district clerk. <input type="checkbox"/> Mail ballot to me at: (mailing address) <div style="margin-top: 10px; border-top: 1px solid black; display: flex; justify-content: space-between;"><div style="width: 30%;">Street No. Street Name</div><div style="width: 20%;">City</div><div style="width: 20%;">State</div><div style="width: 30%;">Zip Code</div></div></div>			
7	<div style="margin-top: 10px;">I certify that I am a qualified and registered voter. 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 materially false statement in the foregoing statement of application for absentee ballots, I shall be guilty of a misdemeanor.</div> <div style="margin-top: 10px;">Date: _____ Signature of Voter: _____</div>			

If applicant is unable to sign because of illness, physical disability or inability to read, the following statement must be executed:

By my mark, duly witnessed hereunder, I hereby state that I am unable to sign my application for an absentee ballot without assistance because I am unable to write by reason of my illness or physical disability or because I am unable to read. I have made, or have the assistance in making, my mark in lieu of my signature (no power of attorney or preprinted name stamps allowed).

Date: ____/____/____ Name of Voter: _____ Mark: _____

I, the undersigned, hereby certify that the above-named voter affixed his or her mark to this application in my presence and I know him or her to be the person who affixed his or her mark to said application and understand that this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Address of Witness to Mark: _____ Signature of Witness to Mark: _____

Instructions

Who may use this application for a school district absentee ballot?

You may use this application if you are a qualified voter who resides in a school district. You may only apply for an absentee ballot on your own behalf.

Who is a qualified voter?

You are qualified to vote in your school district if you are:

- A citizen of the United States;
- At least 18 years of age; and
- A resident of the school district for a period of at least 30 days preceding the meeting or election at which you seek to vote.

No person shall have the right to register for or vote at any school meeting or election who would not be qualified to register for or vote at an election in accordance with the provisions of Election Law §5-106.

Information for Military Voters

Do not use this application if you are:

- A qualified voter who will be absent from your school district on the day of the election as a result of actual military service;
- A qualified voter who has been discharged from actual military service within 30 days of the election in which you seek to vote; or
- the spouse, parent, child or dependent of a military voter as set forth above who is accompanying such military voter and who is qualified to vote in the same school district as the military voter.

If you meet any of the above criteria, you are entitled to special provisions if you apply for a military ballot. Please contact your school district to receive the appropriate application form.

Information for voters with an illness or disability

If you check the box indicating your illness or disability is permanent, and you are identified as a permanently disabled voter by the county board of elections, once your application is approved you will automatically receive a ballot for each school district election in which you are eligible to vote, without having to apply again. You may sign the absentee ballot application yourself, or you may make your mark and have your mark witnessed in the spaces provided on the bottom of the application. Please note that a power of attorney or printed name stamp is not allowed for any voting purpose.

Information for voters with Covid-19 concerns:

Due to the on-going pandemic, voters may request an absentee ballot to place their vote if they do not wish to be out in the public.

Where and when to return this application

If you request that the absentee ballot be mailed to you, your application must be received by the district clerk for your school district no later than 7 days before the election for which you seek an absentee ballot. Otherwise, you may personally deliver your application to the district clerk no later than the day before the election. You may not submit your application more than 30 days prior to the election.

When your absentee ballot will be sent to you

If you request that the absentee ballot be mailed to you, the district clerk will mail your ballot by regular mail no later than 6 days prior to the election. Otherwise, the district clerk will deliver your ballot to you or your agent, as designated on your application, when you or your agent appears in the district clerk's office.

For your ballot to be canvassed, it must be received by the school district clerk by 5:00 p.m. on the day of the election.