#### Instructions

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

You may use this application if you are a qualified voter. 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 vote at any school meeting or election who would not be qualified to 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.

### 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.

## 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 p.m. on the day of the election.

## **APPLICATION FOR ABSENTEE BALLOT**

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. If you are qualified for absentee voting and issued an absentee ballot, the ballot itself must be received by the School District Clerk by 5 PM on the day of the election in order to be canvassed.

I,	, residing at
Centa State	Ty that I am, or will be, on the day of the school district referendum a qualified voter of the Harrison ral School District. I am, or will be, on such date, over eighteen years of age, a citizen of the United s and have, or will have, resided in the district for thirty days preceding the date of the vote; I will be le to appear to vote in person on the day of the school district vote for one of the following reasons:
Chec	k and complete one of the following subdivisions:
A.	I will be a patient in a hospital; or
	Because of illness or physical disability.
	Briefly describe such illness or disability and list the name of your attending physician, if any.
В.	My duties, occupation, business, or studies will require me to be outside the county of my residence on such date.  Describe duties, occupation, business or studies:
	OR
	My duties, occupation, or business do not ordinarily require my absence from the county of m residence; however, the special circumstances that require my absence on such date are as follows:
C.	I will be on vacation outside my county of residence from to during which time I will be at the following place(s):
	Name of Employer: $OVER \rightarrow$

# Office of the District Clerk, Harrison CSD, 50 Union Ave, Harrison, NY 10528

	Signature of Voter	- Date		
unde	•	tement to the best of my knowledge and belief, attement in the foregoing statement of application nor.		
	Mail ballot to me at this address:		_	
	Deliver to me in person at the Office of Sch	nool District Clerk.		
Delivery of School District Absentee Ballot (check one)				
	has not applied for an absentee ba	llot		
	The person through whom I claim to be seem has applied for an absentee ballot	,		
	Provide details:			
	confined due to illness or physical	l disability		
	a patient at a hospital detained in jail			
	will be absent due to vacation			
	such absence is not caused by the fact the county, or	at his regular daily place of business is located or	utside such	
		his residence due to his duties, occupation or bus		
	of, and reside in the same household with	h a person qualified to apply in that such a person	n	
Е.	on the day of the School District election spouse parent	e voter in that I expect to be absent from the School by reason of accompanying or being with the:  child	(check one)	
	2. awaiting trial 3. after conviction for an	offense other than a felony		
D.	I will be detained in jail: 1. awaiting action by a Gr	rand Jury		
	located at			
	If self-employed, I am engaged in busine	ess of:		
	Address:			