

VOTER REGISTRATION POLICY

The school encourages its students to register to vote. The National Mail Voter Registration Form is available from the U.S. Election assistance commission (EAC) website.

U.S. citizens who are students and of voting age, can find information specific to their states of residence from: www.eac.gov/voterresources or call the Election Assistance Office at (866) 747-1471.

How Do I Register to Vote?

You may register to vote by completing and submitting the National Mail Voter Registration Form. This form may be used to report a name or address change to the voter registration office or to register with a political party. You may obtain this form in person from the following public facilities.

- State or local election offices
- The Department of Motor Vehicles
- Public Assistance Agencies
- State funded programs that serve people with disabilities
- Any public facility a state has designated as a voter registration agency (such as public libraries, public schools, city or clerk's offices).

Am I Eligible to Vote?

You must be 18 years of age and a U.S. citizen to be eligible to vote. States may have their own requirements, which are outlined in the "State Instructions" section of the National Mail Voter Registration Form.



New York State Voter Registration Form

Register to vote

With this form, you register to vote in elections in New York State. You can also use this form to:

- change the name or address on your voter registration
- become a member of a political party
- change your party membership

To register you must:

- be a U.S. citizen;
- be 18 years old by the end of this year;
- not be in prison or on parole for a felony conviction;
- not claim the right to vote elsewhere.

Send or deliver this form

Fill out the form below and send it to your county's address on the back of this form, or take this form to the office of your County Board of Elections.

Mail or deliver this form at least 25 days before the election you want to vote in. Your county will notify you that you are registered to vote.

Questions?

Call your County Board of Elections listed on the back of this form or 1-800-FOR-VOTE (636-7783) ext. 710

Find answers or look on our website www.elections.state.ny.us

Verifying your identity

We'll try to check your identity before Election Day, through the DMV number (driver's license number or non-driver ID number), or the last four digits of your social security number, which you'll fill in below.

If you do not have a DMV or social security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form—be sure to tape the sides of the form closed.

If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-6622

電話: 1-800-367-6622 (英語) 或 1-800-367-6622 (中文)

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It is a crime to procure a false registration or to furnish false information to the Board of Elections. Please print in blue or black ink.

1 Qualifications	1	Are you a citizen of the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answer <i>No</i> , you cannot register to vote.	FOR RECORD USE ONLY											
	2	Will you be 18 years of age or older on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answer <i>No</i> , you cannot register to vote unless you will be 18 by the end of the year.												
Your name	3	Last name _____ First name _____	Suffix _____ Middle Initial _____											
More information	4	Birth date <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> <input type="checkbox"/> M <input type="checkbox"/> F											5	Sex <input type="checkbox"/> M <input type="checkbox"/> F
6	Telephone (optional) <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>													
The address where you live	7	Address (not P.O. box) _____												
		Apt. Number _____	Zip code <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											
City/Town/Village _____ New York State County _____														
The address where you receive mail <i>Skip if same as above</i>	8	Address or P.O. box _____												
		P.O. Box _____	Zip code <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											
City/Town/Village _____														
Voting history	9	Have you voted before? <input type="checkbox"/> Yes <input type="checkbox"/> No	10	What year? <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>										
Voting information that has changed <i>Skip if this has not changed or you have not voted before</i>	11	Your name was _____												
		Your address was _____												
		Your previous state or New York State County was _____												
Identification You must make 1 selection <i>For questions, please refer to Verifying your identity above.</i>	12	<input type="checkbox"/> New York State DMV number <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>												
		<input type="checkbox"/> Last four digits of your Social Security number <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>												
<input type="checkbox"/> I do not have a New York State driver's license or a Social Security number.														
Political party You must make 1 selection <i>To vote in a primary election, you must be enrolled in one of these listed parties—except the Independence Party, which permits non-enrolled voters to participate in certain primary elections.</i>	13	<input type="checkbox"/> Democratic party	15	14 Affidavit: I swear or affirm that • I am a citizen of the United States. • I will have lived in the county, city or village for at least 30 days before the election. • I meet all requirements to register to vote in New York State. • This is my signature or mark in the box below. • The above information is true. I understand that if it is not true, I can be convicted and fined up to \$1,000 and/or jailed for up to four years.										
		<input type="checkbox"/> Republican party												
		<input type="checkbox"/> Conservative party												
		<input type="checkbox"/> Working Families party												
		<input type="checkbox"/> Independence party												
		<input type="checkbox"/> Green party												
<input type="checkbox"/> Other _____														
<input type="checkbox"/> I do not wish to enroll in a party														
Optional questions	14	<input type="checkbox"/> I need to apply for an Absentee Ballot (optional).	15	Sign _____										
		<input type="checkbox"/> I would like to be an Election Day worker (optional).	Date _____											

MOHSTEN AND SEAL


Male
 Female

Sign _____
 Date _____

Last name _____
 First name _____
 Middle initial _____
 Suffix _____

Apt. Number _____
 Zip code _____
 City _____
 State _____
 Birth date _____
 Sex M F
 Height _____
 Ft. _____
 In. _____

(Optional) Register to donate your organs and tissues
 For more information on how to register, visit www.organdonor.gov or call 1-800-368-8609.


Board of Elections Borough Offices
General Office
 32 Broadway, 7 Fl
 New York, NY 10004-1609
 Tel: 1.212.487.5300

Borough Offices

Manhattan 200 Varick St., 10 Fl New York, NY 10014 Tel: 1.212.896.2100	Brooklyn 345 Adams Street, 4 Fl Brooklyn, NY 11201 Tel: 1.718.751.8800	Staten Island 1 Edgewater Plaza, 4 Fl Staten Island, NY 10305 Tel: 1.718.875.0079
Bronx 1790 Grand Concourse, 5 Fl Bronx, NY 10457 Tel: 1.718.255.9017	Queens 125-05 Queens Boulevard Kew Gardens, NY 11415 Tel: 1.718.750.6730	

BOARD OF ELECTIONS
 32 BROADWAY FL 7
 NEW YORK NY 10275-0067

BUSINESS REPLY MAIL
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POSTAGE WILL BE PAID BY ADDRESSEE

NO POSTAGE
 NECESSARY
 IF MAILED
 IN THE
 UNITED STATES

