2120.2-Е APPLICATION FOR ABSENTEE BALLOT

Application for Absentee Ballot

Pursuant to Section 2018-a of the Education Law Name: Address: Number and Street Village/Town/City Zip State

qualif of the the da years	, am or will be, on the day of the school district election, a ied voter of the Scotia-Glenville School District, am over 18 years of age, a citizen United States and have or will have resided in the district for 30 days preceding ate of election, a qualified voter of the Scotia-Glenville School District, am over 18 of age, a citizen of the United States and have or will have resided in the district days preceding the date of election.
I	am/ am not (check one) currently registered to vote.
Date o	of election or vote for which ballot is requested:
	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 (check one):
	a patient in a hospital, or unable to appear personally at the polling place on such day because of illness or physical disability;
	because of my duties, occupation, business or studies, I will be required to be outside my county or city of residence on such day. (Provide a brief description of such duties, occupation, or business. Where such duties, occupation or business are not o such a nature as ordinarily to require such absence, please state the special circumstances or account of which absence is required):
	because I will be on vacation outside the county or city of residence on such day (please state the dates upon which you expect to begin and end such vacation, the name and address of your employer, if any and if self-employed, or retired, a statement to that effect):

in jail awaiting a conviction for an	absent from my voting residence because I am or will be detained tion by a grand jury, awaiting trial or confined in prison after offense other than a felony. (Please state whether you are action of the grand jury or are confined after conviction for an a felony):
were a qualified	accompanying my spouse/child/parent, who is or would be, if he oter, entitled to apply for the right to vote by an absentee ballot e, address and relationship of person referred to in this
belief, and I understand	e foregoing is a true statement to the best of my knowledge and that if I make any material false statement in the foregoing a for absentee ballot, I shall be guilty of a misdemeanor.
 Date	Signature of Voter
Please return to:	
District Clerk Scotia-Gl	enville Central School District
Address	