Application for Absentee Ballot

This Application must be received by the District Clerk (Administration Office) at One Library Drive, Port Washington, NY 11050 by TUESDAY, APRIL 5, 2022 if the official ballot is to be mailed to the voter. This Application must be received by the District Clerk not later than the day before the election, if the official ballot is to be hand delivered to the voter.

State of New York
Port Washington School District
County of Nassau

I, __________________________________________________________________________
(Print Name)
reside at _______________________________________________________________________

I am a qualified voter of the School District in which I reside in that: ☐ I am or will be on such date, over 18 years of age, a citizen of the United States and have or will have resided in the district for thirty days preceding such date.

I will be unable to appear to vote in person on the day of the Port Washington Public Library election for which the absentee ballot is requested because I am or will be on such day:

(Complete one of the following subdivisions)

A. ☐ A patient in a hospital or unable to appear personally at the polling place on such day because of illness or physical disability.

B. ☐ Outside of the county or city of my residence on such day, because of my duties, occupation or business requirements.

☐ 1. Where such duties, occupations or business are of such a nature as ordinarily to require such absence, a brief description of such duties, occupation or business shall set forth in such application:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

☐ 2. Where such duties, occupation or business are not of such a nature as ordinarily to require such absence, such application shall contain a statement of the special circumstances on account of which such absence is required.

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

(over please)
PORT WASHINGTON PUBLIC LIBRARY BUDGET/TRUSTEE ELECTION

APPLICATION FOR ABSENTEE BALLOT

C. □

On vacation elsewhere on such day.  I expect that such vacation will begin on _______________________________ and end on _______________________________ and will be at the following named place or places:

Name of Employer___________________________________

Address of Employer ______________________________________________________________

or

Self-employed as a ________________________________________________________________

Located at_____________________________________________________________________

D. □

I will be absent from my voting residence because:

☐ I am detained in jail awaiting action by grand jury.
☐ I am awaiting trial.
☐ I am confined after conviction for an offense other than a felony.

E. □

I am entitled to vote as an absentee voter in that I expect to be absent from the School District on the day of the Port Washington Public Library’s election by reason of accompanying or being with the (check one) ☐ spouse, ☐ parent, ☐ or child of, and reside in the same household with a person qualified to apply in that such a person (check one) ☐ will be absent from the county of his residence due to his duties, occupation or business and such absence is not caused by the fact that his regular daily place of business is located outside such county, or ☐ will be absent due to vacation, ☐ a patient at a hospital, ☐ detained in jail, ☐ confined due to illness or physical disability.

The person through whom I claim to be so entitled (check one) ☐ has ☐ has not applied for an absentee ballot.

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 MATERIAL FALSE STATEMENTS IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOT, I SHALL BE GUILTY OF A MISDEMEANOR.

____________________________________  ______________________
Signature                                      Date