REQUESTING AN ABSENTEE BALLOT for a DRESDEN SCHOOL DISTRICT ELECTION

Duly qualified voters of **Hanover, NH**, who will be unable to vote on the date of the election due to absence from Town, a religious observance, disability or illness, or employment commitments (including caregiving) during the entire time the polls are open, may request an absentee ballot.

Duly qualified voters of **Norwich, VT**, may choose to vote by absentee ballot for any reason.

Both Hanover and Norwich voters may obtain an absentee ballot request form from the Superintendent of School's office, 41 Lebanon Street, Suite 2, Hanover (643-6050), or from the Hanover or Norwich Town Clerk's office. The request form must be signed and returned to the SAU office by mail, fax (643-3073), or in person, before a ballot can be sent. The request form can also be completed and signed, scanned, and then emailed to ryanneschoonover@sau70.org. AN ORIGINAL SIGNATURE IS REQUIRED. Please make sure to print your name where appropriate on the form and sign the form. If the name on the form is not legible, the ballot will become a spoiled ballot and will not be counted.

If you are requesting a ballot for another person, you may pick up or download a request form, take the form to the absentee voter, obtain that person's signature, and return the request to the Superintendent's or Town Clerk's office. The absentee ballot will be mailed to the absentee voter.

No requests for absentee ballots will be accepted after 12:00 noon on the day preceding the date for the voting phase of the meeting. If you have questions, please contact the SAU office.

Carole E. Bibeau, Dresden District Clerk

APPLICATION FOR OFFICIAL DRESDEN SCHOOL DISTRICT ABSENTEE BALLOT

To the Dresden School District Clerk: I, _______________________________ (please print your name), hereby apply for an official absentee voting ballot. I am a duly qualified voter and entitled to vote in the Town of Hanover or Norwich. Mail absentee voter’s ballot to:

Signature: ____________________________________________________________

Street address: ________________________________________________________

City/Town, State, Zip Code: ____________________________________________

Return completed, signed form to:
Superintendent of Schools, SAU 70, 41 Lebanon St, Suite 2, Hanover NH 03755 (mail or in person)

Or **fax** the completed, signed form to the Superintendent’s office: (603) 643-3073

Or scan a completed, signed form and **email** to: ryanneschoonover@sau70.org

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