

## Application for Military Ballot – Please print clearly.

This application must be received by the Office of the Nassau BOCES District Clerk (71 Clinton Road, Garden City, NY 11530), not later than 4:00 PM on Friday, September 19, 2025. Please note that an original copy of this application for a military ballot must be returned to the Office of the District Clerk either by personal delivery or by mail.

1. **I am requesting a Military Ballot because I am (check one):**

- In military service and by reason of such military service will be absent on the day of the election
- In military service and will be discharged from such military service within 30 days of the election
- The (check one) \_\_spouse, \_\_parent, \_\_child, or \_\_dependent of such qualified military voter accompanying or being with the qualified military voter and am also a qualified voter of New York State and resident of the same school district

2. **Name:**

\_\_\_\_\_

last name or surname	first name	middle initial	suffix
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3. **Residential Address in School District:**

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street address	town	state and zip code
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4. **Military Address:**

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street address	town	state or country and zip code
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5. **Preference for Receiving Military Ballot Application, Ballot and other Materials (check one):**

- Mail (specify Residential or Military Address) \_\_\_\_\_
- Email (provide email address) \_\_\_\_\_
- Fax (provide fax number) \_\_\_\_\_

Please note that such designation will remain in effect until revoked or changed by the Military voter. In addition, the Military voter is responsible for notifying the Office of the District Clerk of any change in the designated transmission address or military stats.

6. **Military Voter Affirmation:**

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 statement in the foregoing statement of application for personal registration, I shall be guilty of a misdemeanor.

Signature of Voter \_\_\_\_\_ Date \_\_\_\_\_