Please send the completed form to: Office of the District Clerk, 75 Barker Road, Pittsford, NY 14534

NOTE: If we are unable to read the required information, will not be able to process.

PITTSFORD CENTRAL SCHOOL DISTRICT
EARLY VOTING BALLOT APPLICATION FORM

ALL APPLICANTS MUST COMPLETE THE FOLLOWING

I am requesting an early voting ballot for the May 19, 2026 District Vote.

Applicant's Name_____
LAST FIRST MIDDLE INITIAL

Street Number & Address_____

City/Town/Village_____
ZIP CODE

APPLICANT MUST SIGN BELOW

I am a qualified voter of the Pittsford Central School District in that I am or will be, on the date of the school district election or vote, over 18 years of age, a citizen of the United States and have or will have resided in the Pittsford Central School District for 30 days preceding such date.

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 forgoing statement of application for early mail ballot, I shall be guilty of a misdemeanor.

_____, 2026 _____
(date) (signature of voter)

Applications must be signed and received by the District Clerk or designee **NOT LATER THAN 5:00PM** seven (7) days before the District vote and/or election if the ballot is to be mailed or one (1) day before the district vote and /or election if the ballot is to be personally delivered to the voter in the Office of the District Clerk.

FOR OFFICE USE ONLY

Application received	Ballot received
Application approved	
Ballot distributed	