

Election  
**@**Bard

# Voter Registration Manual 2014

Questions?  
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THE  
ANDREW GOODMAN  
FOUNDATION

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Bard  
CCE

**College students have a right to vote in the location they consider home, whether that be locally at their college address or the home from which they came to Bard.**

Students should be made aware that voting away from Bard is *usually* a two-step process:

- 1- Students must successfully register to vote in the location from which they came to Bard.
- 2- Students must complete a state-specific absentee ballot request form.

For those on-campus residents who are registered to vote locally, the CCE regularly provides polling place shuttles on election day.

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## Register Locally, On-Campus Residents

*Pre-formatted NYS forms with proper address fields can be downloaded from [election.bard.edu](http://election.bard.edu)*

The Dutchess County Board of Elections requires a standardized address field format. A lawsuit against the Board of Elections standardized the housing address field for all on-campus residents of Bard.

A sample form can be found on the next page.

*Box 7 Address Where You Live:*

*Address:* **Bard College 30 Campus Road**

*City/Town/Village:* **Annandale-on-Hudson**

*New York State County:* **Dutchess**

*Zip Code:* **12504**

*Box 8 Address Where You Receive Mail:*

*Address or P.O. Box:* **Bard College MSC# \_\_ (student mailbox #) \_\_**

*P.O. Box:* **PO BOX 5000**

*City/Town/Village:* **Annandale-on-Hudson**

*Zip Code:* **12504**

*Box 12 Identification:*

**NYS Driver's License # OR Last 4 of Social Security #**

*Box 13 Political Party:*

**One selection must be made.**

*Note: The Independence Party is a party. If a student desires no party affiliation, they must select "I do not wish to enroll in a party"*

**The form must be signed and dated in Box 15.**



## Register Locally, Off-Campus Residents

Off-campus residents are located in different voting districts and must register to vote using their off-campus housing address. Students should re-register at their new address if they have moved since their previous registration. Once they have been successfully registered to vote, off-campus residents will receive a postcard informing them of their polling place.

**Off-campus residents must be able to receive mail at their off-campus address. If they can not receive mail, they should input their Bard College mailing address in *Box 8 Address Where You Receive Mail*.**

A sample blank NYS voter registration form can be found on the next page.

*Box 7 Address Where You Live:*

**Enter off-campus housing address**

*Box 8 Address Where You Receive Mail:*

**-Leave blank if you receive mail off-campus**

**-If you do not receive mail off-campus, enter your Bard mailing address:**

*Address or P.O. Box:* **Bard College MSC#\_\_(student mailbox #)\_\_**

*P.O. Box:* **PO BOX 5000**

*City/Town/Village:* **Annandale-on-Hudson**

*Zip Code:* **12504**

*Box 12 Identification:*

**NYS Driver's License # OR Last 4 of Social Security #**

*Box 13 Political Party:*

**One selection must be made.**

*Note: The Independence Party is a party. If a student desires no party affiliation, they must select "I do not wish to enroll in a party"*

**The form must be signed and dated in Box 15.**



## **Register Away From Bard**

*A national voter registration form with a pre-formatted Bard mailing address field may be downloaded from [election.bard.edu](http://election.bard.edu)*

Some states allow for voting by mail, commonly referred to as absentee voting. Voting by mail is usually a two step process, you must:

- 1) Register to Vote In Your Home State
- 2) Submit an Absentee Ballot Request Form

Page 7 provides basic state registration requirements. Once they have successfully registered, students may visit [LongDistanceVoter.org](http://LongDistanceVoter.org) for state-specific absentee ballot request forms.

A sample national voter registration form is provided on page 8.

### *Section 2 Home Address*

**Enter home address.**

### *Section 3 Address Where you Receive Mail*

**Enter your mailing address so that voter-related mail will reach you while school is in session.**

-If you live off-campus and receive mail at your off-campus address, enter your off-campus address.

-If you live on-campus, or you do not receive mail at your off-campus address, enter your Bard College mailing address:

**Bard College PO BOX 5000 MSC#\_\_(student mailbox #)\_\_  
Annandale-on-Hudson, NY 12504**

# Voter Registration Application

Are you a citizen of the United States of America? <span style="float: right;">Yes      No</span> Will you be 18 years old on or before election day? <span style="float: right;">Yes      No</span> <b>If you checked "No" in response to either of these questions, do not complete form.</b> (Please see state-specific instructions for rules regarding eligibility to register prior to age 18.)		This space for office use only.
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<b>1</b>	Mr.      Miss Mrs.      Ms.	Last Name	First Name	Middle Name(s)	Jr      II Sr      III IV	
<b>2</b>	Home Address		Apt. or Lot #	City/Town	State	Zip Code
<b>3</b>	Address Where You Get Your Mail If Different From Above Bard College PO BOX 5000 <b>MSC#</b> _____			City/Town Annandale-on-Hudson	State NY	Zip Code 12504
<b>4</b>	Date of Birth _____ Month    Day    Year		<b>5</b>	Telephone Number (optional)	<b>6</b>	
<b>7</b>	Choice of Party (see item 7 in the instructions for your State)		<b>8</b>	Race or Ethnic Group (see item 8 in the instructions for your State)		

<b>9</b> I have reviewed my state's instructions and I swear/affirm that: ■ I am a United States citizen ■ I meet the eligibility requirements of my state and subscribe to any oath required. ■ The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or (if not a U.S. citizen) deported from or refused entry to the United States.	<div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> Please sign full name (or put mark) ▲  Date: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> </tr> </table>				Month	Day	Year
Month	Day	Year					

**If you are registering to vote for the first time:** please refer to the application instructions for information on submitting copies of valid identification documents with this form.

## Please fill out the sections below if they apply to you.

If this application is for a **change of name**, what was your name before you changed it?

<b>A</b>	Mr.      Miss Mrs.      Ms.	Last Name	First Name	Middle Name(s)	Jr      II Sr      III IV
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If you were **registered before but this is the first time you are registering from the address in Box 2**, what was your address where you were registered before?

<b>B</b>	Street (or route and box number)	Apt. or Lot #	City/Town/County	State	Zip Code
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If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

<b>C</b>	<ul style="list-style-type: none"> <li>■ Write in the names of the crossroads (or streets) nearest to where you live.</li> <li>■ Draw an X to show where you live.</li> <li>■ Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark.</li> </ul>	<b>NORTH</b> ↑									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">                 Example                  _____                  _____                  _____             </td> <td style="width: 5%; text-align: center; vertical-align: middle;">Route #2</td> <td style="width: 75%; padding: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">● Grocery Store</td> <td style="width: 50%;"></td> </tr> <tr> <td style="text-align: center;">Woodchuck Road</td> <td></td> </tr> <tr> <td style="text-align: center;">Public School ●</td> <td style="text-align: right;">X</td> </tr> </table> </td> </tr> </table>	Example _____ _____ _____	Route #2	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">● Grocery Store</td> <td style="width: 50%;"></td> </tr> <tr> <td style="text-align: center;">Woodchuck Road</td> <td></td> </tr> <tr> <td style="text-align: center;">Public School ●</td> <td style="text-align: right;">X</td> </tr> </table>	● Grocery Store		Woodchuck Road		Public School ●	X	
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If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

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**Mail this application to the address provided for your State.**