OFFICE OF POLICY, PROCEDURES, AND TRAINING



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Office of Procedures

POLICY DIRECTIVE #16-02-OPE

(This Policy Directive Replaces PD #08-28-OPE)

REVISIONS TO VOTER REGISTRATION PROCESS

<u> </u>	
Date: January 21, 2016	Subtopic(s): Voter Registration
AUDIENCE	The instructions in this policy directive are for staff at Job Centers and Non-Cash Assistance (NCA) Supplemental Nutrition Assistance Program (SNAP) Centers. These instructions are informational for all other staff.
REVISIONS TO THE PRIOR DIRECTIVE	 This policy directive has been revised to: Inform JOS/Workers that the contact information for the FIA National Voter Registration (NVR) Program Coordinator has been changed. Update the address for Project Support. Add the FIA NVR Project Coordinator. Change program name from Food Stamp to Supplemental Nutrition Assistance Program (SNAP). Inform staff that the Form NVRA-05 is available in Bengali. Inform staff of the online Voter Registration form process. Inform staff that the FIA-35 has been renamed to POST-101.
POLICY Mail-in voter registration forms should be sent directly to the New York City Board of Elections by the applicant/participant.	The adult (an individual 18 years of age or older) <u>casehead</u> of every Cash Assistance (CA) and SNAP household must be offered assistance in registering to vote. This can be done by giving him/her Form NVRA-05 during application/recertification and when he/she reports a change of address. Mail-in voter registration forms should be offered to caseheads who do not wish to register to vote at the Center. They should be made available to all other adult household members upon request. Note: Voter registration assistance may also be offered to a 17-year- old household member who will turn 18 before the end of the year during which the CA and/or SNAP interview is held.

HAVE QUESTIONS ABOUT THIS PROCEDURE? Call 718-557-1313 then press 3 at the prompt followed by 1 or send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

BACKGROUND	The National Voter Registration Act (NVRA) of 1993 was enacted by Congress in an attempt to increase the number of registered voters throughout the country and enhance voter turnout in elections. It requires states to offer voter registration assistance in all offices that provide state-funded assistance to the public. The act also provides that individuals can register to vote by mail using mail-in forms developed by each state and the Election Assistance Commission. Chapter 659 of the Laws of 1994 conformed State law to the requirements of the NVRA of 1993 by designated city and state agencies to offer the individuals they service the opportunity to register to vote. The New York City Human Resources Administration (HRA) is designated as a participating voter registration agency and is mandated to provide each individual with assistance and confidentiality in the completion of voter registration forms.
	In order to register to vote in New York City, an individual must:
	 be a United States (U.S.) citizen (this includes persons born in Guam, Puerto Rico, and the U.S. Virgin Islands); be at least 18 years of age before the next election (individuals under the age of 18 are ineligible to vote in any city, state, or federal election); have been a New York City resident for at least 30 days; not be serving a jail sentence or be on parole for a felony conviction; not have been judged mentally incompetent by a court; and not claim the right to vote outside of the City of New York.
REQUIRED ACTION	JOS/Workers must explicitly offer all CA and SNAP applicants/participants the opportunity to register to vote. Voter registration applications are available at application, recertification, and at any time a change of address is reported.
Revised	Applicants/participants may register to vote by using Form NVRA-05 which is attached to all CA and NCA SNAP application/recertification forms. Form NVRA-05 is available in English, Spanish, Chinese, Korean, and Bengali.
	In addition to registering to vote, the form is used to:
	 record a change in name or address since the last time the person voted; and/or enroll in a political party or change party affiliation.

New Information Online Process Refer to <u>PD #15-07-OPE</u> and <u>PD #15-30-SYS</u> The SNAP application/Recertification are available online with the Voter Registration form **NVRA-05** attached. An applicant/participant can complete the form after it has been printed from the internet. Once he/she has completed the form, it can be returned to the Job Center or mailed directly to the NYC Board of Elections.

Job and NCA SNAP Center staff must provide the following voter registration services:

- Distribution of Form **NVRA-05** to all adult caseheads applying/recertifying for benefits or reporting a change of address in person. The JOS/Worker should instruct the participant/household member receiving the mail-in form to send it directly to his/her local Board of Elections.
- Distribution of Form NVRA-05 to all adult caseheads applying/recertifying for benefits by mail. The JOS/Worker should request that the applicant/participant return Form NVRA-05 to the Center along with his/her application or recertification form.

Note: JOS/Workers must keep a count of all mail-in voter registration forms sent to applicants/participants and give that information to the Voter Registration Site Coordinator.

 Applicants/participants should never be denied the opportunity to register to vote. Although a JOS/Worker should inform an applicant/participant of the voter registration criteria (on page 2 of this directive), it is ultimately the responsibility of the New York City Board of Elections to determine whether an individual is eligible to register to vote.

Providing Assistance on Completing Voter Registration Form:

A JOS/Worker providing voter registration assistance at Job and NCA SNAP Centers must:

- ask the individual, "If you are not currently registered to vote where you live now, would you like to register to vote here today?";
- after asking the question above, make the following statements to the same individual:
 - "Applying or declining to register to vote will have no affect on the assistance that will be provided to you by this Agency"; and

JOS/Workers must include Form **NVRA-05** in all mailings containing copies of CA and/or SNAP application and recertification forms sent to individuals who do not apply/recertify for benefits in person.

Voter registration forms cannot be completed in POS, therefore, JOS/Workers must print a copy of Form **NVRA-05** and follow the steps outlined in this procedure.

The same level of assistance provided to individuals completing

CA and/or SNAP application/recertification forms must be offered to applicants/participants completing voter registration forms. "If you would like help in filling out the voter registration application form, I can help".

If the applicant/participant would like to register to vote the JOS/Worker must:

- ask the individual to check the "YES" box of Form NVRA-05, sign (in blue or black ink only), and put the date in the upper left corner;
- check to ensure the following sections are complete and contain clearly printed information:
 - Citizenship status
 - Name (first name, middle initial, and last name)
 - Home address (address where the applicant/participant lives)
 - Mailing address (if different from home address)
 - Date of birth
 - Telephone number (if available)

Note: If the applicant/participant does not have the information to complete one of the above sections, the JOS/Worker should offer him/her a mail-in voter registration form. If the applicant/participant insists on submitting a form with missing information, the JOS/Worker must accept it and forward the form to the Voter Registration Site Coordinator if it at least contains a signature and date.

- provide the individual with a Voter Information Card (NVRA-02);
- inform the individual that he or she should receive a response by mail from the Board of Elections in approximately six weeks.

All signed and dated voter registration forms must be forwarded to the Voter Registration Site Coordinator on the same day they are received even if the application or recertification for benefits is deferred.

Note: If a CA and/or SNAP participant would like to register to vote, or update his/her voter registration information, but is not due for a recertification interview, offer that individual the same assistance as described above.

If the individual declines assistance in registering to vote, have him/her complete one of the following steps:

- If the individual declines assistance with registering to vote because he/she has already registered at his/her current address, ask him/her to check "Already Registered" on Form NVRA-05;
- If the individual declines assistance with registering to vote (for a reason other than already being registered), ask him/her to check "No" on Form NVRA-05; or
- If the individual wants a mail-in registration form, ask him/her to check the box that indicates a request for a mail-in registration and give him/her a mail-in voter registration form and Form NVRA-02. The JOS/Worker must also instruct the individual to mail the voter registration form to his/her local Board of Elections (the locations are listed on the form).

Once the individual has checked the appropriate declination box in the upper left corner of Form **NVRA-05**:

- ask him/her to sign and date the form;
 - If the individual refuses to complete any part of the form, do not attempt to coerce the individual to complete the form.
- collect the declination or blank form from the applicant/participant; and
- forward the form to the Voter Registration Site Coordinator or Designee.

Individuals referred by a community-based organization, who bring a pre-typed black and white application form, must also be offered the opportunity to register to vote. If the individual has not completed a voter registration form or does not have one, proceed as instructed above.

Job and NCA SNAP Center staff are prohibited from:

- offering advice related to political preference or party affiliation;
- displaying personal views about political preference or party affiliation;
- discouraging applicants/participants from registering to vote; and
- determining benefit eligibility based on voter registration.

Voter registration is not an eligibility requirement for determining CA or SNAP benefits.

The Role of the Voter Registration Site Coordinator

	The Voter Registration Site Coordinator is a staff member designated by the Director/Manager of the Job or NCA SNAP Center who acts as a liaison between the Center and the Family Independence Administration (FIA) NVR Program Coordinator. Every Job and NCA SNAP Center should be staffed with a Voter Registration Site Coordinator and a backup coordinator. Each year the Voter Registration Site Coordinator and backup coordinator must attend a training course conducted by the NYS Board of Elections. Therefore, the Center Director/Manager should immediately notify the FIA NVR Program Coordinator anytime a new Voter Registration Site Coordinator or backup coordinator has been designated.
	The Voter Registration Site Coordinator must also receive training from the FIA NVR Program Coordinator as needed.
	The contact information for the FIA NVR Program Coordinator is listed below:
Revised	Sarah Wong (NVR Program Coordinator) Telephone: (929) 221-6694 e-mail: <u>wongsa@hra.nyc.gov</u>
New Information	Pamela Gray (NVR Project Coordinator) Telephone: (929) 221-7408 e-mail: graypa@hra.nyc.gov
Revised	FIA Office of Project Support 4 World Trade Center 150 Greenwich Street, 36th Floor New York, NY 10007 Fax: (929) 221-0761
	The Voter Registration Site Coordinator is responsible for ordering voter registration materials from the New York State Board of Elections.
	Each day the Voter Registration Site Coordinator must complete the following tasks:
	 Collect completed voter registration forms along with all signed and dated declinations including those marked "Already Registered"; Attempt to resolve all problems and answer any questions that staff may have concerning the voter registration process;

- Ensure that all staff are trained to provide voter registration assistance to individuals;
- Retain a file of declinations/blanks (No/refusal to register, mail-in requests and already registered) that have been signed and dated;

Note: This file should be retained at the Center for 22 months.

- Discard all voter registration forms that have not been signed and dated; and
- Maintain an adequate supply of New York State Board of Elections voter registration materials, including posters, brochures and forms. The NYS Agency-Based Voter Registration Supply Order Form (Attachment A) is to be used for ordering these materials.

The order form can be sent by fax to (518) 473-8315 or by mail to:

New York State Board of Elections 40 North Pearl Street, Suite 5 Albany, New York 12207

The contact telephone number for the NYS Board of Elections is: (518) 474-1953

Every Tuesday (or Wednesday, if Tuesday is a holiday), the Voter Registration Site Coordinator must:

- obtain the total number of applicants and participants (recertifying or reporting a change of address) who entered the Center during the previous week;
- obtain the total number of applications received in Job Centers during the previous week using the POS Application Tracking and Aging reports;
- obtain copies of the Recertification Recap Report Form (W-909KK) from the Deputy Director of the Job Center, or the E4 Report Activity from the NCA SNAP Center Manager or Designee for the previous week;
- utilize the above-mentioned reports to add the total number of application/recertification interviews for the previous week at the Center as of the close of business on the previous Friday;
- count and separate the NYS Agency-Based Voter Registration forms into the following four categories:

Under no circumstance should

a completed Voter Registration form be held for more than 10 days.

- Completed voter registration forms;
- NVR declinations/blanks;
- NVR forms with the "Already Registered" box checked off;
- NVR mail-in form requests;
- fax a cover memo (Attachment D) signed by the Center Director or Designee along with copies of Forms NVRA-03, W-793A and W-909KK or the E4 Report to the FIA NVR Program Coordinator;
- complete Section I of Form NVRA-03 (the remainder of the form is to be completed by the NYC Board of Elections);
- report the statistics recorded on Form NVRA-03 to the NVR Program Coordinator and the NYC Board of Elections; and
- mail only those voter registration forms with "YES" checked in the "If you are not registered to vote where you live now, would you like to apply to register here today?" section along with the white and canary copies of Form NVRA-03 to the NYC Board of Elections (Completed Pink copies of Form NVRA-03 are to be kept on file at the Center). The address for the NYC Board of Elections is:

NYC Board of Elections 32 Broadway, 7th Floor New York, NY 10004

Note: The completed Form **NVRA-03** must be submitted to the Center Director or Designee for review. The Center Director or Designee must attest to the accuracy of the number of applicants/participants seen and offered voter registration services during the week.

Monitoring by Voter Registration Site Coordinator

The Voter Registration Site Coordinator at the Job or NCA SNAP Center must survey 5 applicants/participants each week utilizing the NVRA Random Check Form (**W-793A**). This is to document whether individuals entering the Center are being provided with assistance in registering to vote. The interviews should be brief and limited to the questions listed on the survey <u>only</u>. Form **W-793A** must be completed every week and submitted to the FIA NVR Program Coordinator by the close of business on the following Tuesday.

Completing the Voter Registration Process

	The NVR Program Coordinator must review Forms W-793A and NVRA-03 against Form W-909KK (Job Centers) or the E4 Report Activity (NCA SNAP Centers) for accuracy and completeness.							
Mandated Signage Revised See <u>PD #12-18-OPE</u>	Center Directors/Managers must ensure that the NYS Agency- Based Voter Registration (POST-101) poster is displayed prominently. They must ensure that all out-dated versions of forms and posters are removed from circulation and recycled.							
PROGRAM IMPLICATIONS								
Paperless Office System (POS) Implications	Voter registration forms cannot be completed in POS; therefore, JOS/Workers must be sure to print a copy of Form NVRA-05 and provide it to applicants/participants along with the CA and/or SNAP application/recertification form.							
	Reminder: JOS/Workers must <u>never</u> scan/index voter registration forms into the electronic case record.							
Supplemental Nutrition Assistance Program (SNAP) Implications	The opportunity to register to vote must be offered to all SNAP applicants/participants.							
Medicaid Implications	The opportunity to register to vote must be offered to all Medicaid applicants/participants.							
LIMITED ENGLISH PROFICIENT (LEP) AND HEARING IMPAIRED IMPLICATIONS	For Limited English Proficient (LEP) and hearing-impaired applicants/participants, make sure to obtain appropriate interpreter services in accordance with <u>PD #14-24-OPE</u> and <u>PD #14-18-OPE</u> .							
FAIR HEARING	There are no fair hearing implications.							

REFERENCES94-LCM-104
95-ADM-1
98-LCM-40
Supplemental Nutrition Assistance Program (SNAP) Source Book
Section 3, page 12
Supplemental Nutrition Assistance Program (SNAP) Source Book
Section 4, page 27
Temporary Assistance (TA) Source Book Chapter 3, Section D
Election Law § 5-211
9 NYCRR 6213.1
9 NYCRR 4.43
1994 N.Y. ALS 659; 1994 N.Y. Laws 659
42 U.S.C. §§ 1973gg to 1973gg-10
www.vote.nyc.ny.us/register.html

RELATED ITEMS

HRA Procedure #98-5 PD #12-18-OPE PD #15-07-OPE PD #15-30-SYS

ATTACHMENTS

Please use Print on Demand to obtain copies	Attachment A	NYS Agency-Based Voter Registration Supply Order Form					
of forms.	Attachment B	E4 Weekly Activity Report					
	Attachment C	Mail-In Voter Registration Form					
	Attachment D	Fax Cover Sheet					
	NVRA-02	Voter Information Card (Rev. 2/04)					
	NVRA-03	Agency-Based Voter Registration					
		Transmittal Form (10/98)					
	NVRA-05	New York State Agency-Based Voter					
		Registration Form (Rev. 2/15)					
	POST-101	NYS Agency-Based Voter Registration					
		Poster (4/23/12)					
	POST-101 (S)	NYS Agency-Based Voter Registration					
		Poster (Spanish) (4/23/12)					
	W-793A	NVRA Random Check Form (Rev. 7/1/08)					
	W-793A (S)	NVRA Random Check Form (Spanish) (Rev. 7/1/08)					
	W-909KK	Recertification Recap Report (Rev. 7/1/08)					

Attachment A

Item		Quantity
Agency Employee Guide		
Counter Tents		
Transmittal Forms		
Transmittal Envelopes		Large (10"X13")
		Small (4 ¼"X11")
Agency-Based	Language	Quantity (order by pack)
Agency-Based Voter Registration Form (100 per pack)	English	
(F)	Spanish	
· •	Chinese	
	Korean	
Voter Registration Forms	Language	Quantity (order by pack)
Voter Registration Forms Mail Registration - dot coded	English	
(100 per pack)	Spanish	
	Chinese	
	Korean	
Voter Card	Language	Quantity (order by pack)
Informational Handout (100 per pack)	English	
	Spanish	
	Chinese	
	Korean	
Poster	Language	Quantity
	English	·
	Spanish	
•	Chinese	
	Korean	
NVRA Site Code #		New York State Board of Elect 40 Steuben Street Albany, New York 12207-21 (518) 474-1953
Alternate Shipping Address:		Fax (518) 473-8315
	······································	

E4 Weekly Activity Report

Week Ending:

Center						Linuing,			
			MON	TUES	WED	THURS	FRI	SAT	TOTAL
		RECEPTION INTAKE	ACTIV	ITY					
		Pre-screen Activity							0
		Telephone Activity							0
Reception Intake		In Person Inquiry							0
		FTK [RJ]							0
Activity		FTR [Y10]							0
		ID Card Replacement							0
		AFIS							0
		TOTAL	0	0	0	0	0	0	0
		APPLICATION AC	TIVITY	7					
		Prior Appointments Scheduled							0
Reception Activity		Prior Appointments Kept							0
(From W123C)		Walk-Ins							0
		Total-Already Programmed	0	0	0	0	0	0	0
		Cases Deferred							0
	a	Cases Completed-Eligible							0
	b	Cases Completed-Ineligible							0
Interview Activity	c	Total New Applications Completed (a+b)	0		0	0	0	0	0
(From W132E)	d	Deferred Completed-Eligible							0
(FTOIL WIJZE)	e	Cases Completed Ineligible							0
	f	Total Deferrals completed (1+e)	0		0	0	0	0	0
		Total Decisions Made (c+f)	L _û		0	0	0	0	0
		Total Eligible (a+d)	•		0	0	0	0	0
	Π	RECERTIFICATION	A CTIVI	TY					
Reception Activity		Prior Appointments Scheduled							0
(From W123C)		Prior Appointments Kept							0
		Cases Deferred							0
	a	Cases Completed-Eligible							0
	b	Cases Completed-Ineligible							0
Interview Activity	с	Total New Recert Completed (a+b)	0	0	0	0	0	0	0
(From W132E)	d	Deferred Completed-Eligible							0
(From W152E)	e	Cases Completed-Ineligible							0
	f	Total Deferrals Completed (d+e)	0	0	0	0	0	0	0
		Total Decisions Made (c+f)	0	0	0	0	0	0	0
		Total Eligible (a+d)	0	0	0	0	0	0	0
		MPU/SERVICE AC	TIVITY	7					
		In Person							0
Source		Mail							0
(From W132D)		Phone							0
$(110111 \times 152D)$		Matches							0
		TOTAL	0	0	0	0	0	0	0
		Change Action							0
		Budget/Record Review							0
		Application Completion Service							0
Type of Action		CBICs/ID Replacement							0
(From W132E)		Reopen							0
		WMS Inquiry							0
		TOTAL	0	0	0	0	0	0	0
		Potential FS Claims*							0
		FS Claims packets Completed							0
		FAIR HEARING AG	CTIVITY	Y					
		Conference							0
		ATC							0
		Resolution							0
	L	Packet Prep							0
		TOTAL	0	0	0	0	0	0	0

* Number of W140M's completed

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	Ne	w Yor	k State	Vote	r Regis	st	ratio	n Form			
• register to v	Use This For	ate	• you ca	In Order To Vote: • you can register in person at your county board of elections				Questions? Call your county board of election Find the phone number on the other side of this for			
change sinceenroll in a p	r name and/or add you last voted olitical party or cha		• to vote	e in an electi	on, you must mail our county board r			impaired people with TDD k State Relay 711.	TTY may call the		
enrollment To Regis • be a U.S. c	ter You Must		later tha which ye	n 25 days be ou want to vo	efore the election i ote			Visit our website - <u>www.elections.state.ny.us</u> Información en español: si le interesa obtener este			
 be 18 years not be in jail 	old by the end of the or on parole for a	felony conviction	election	in which you	the date of the want to vote		formulari	io en español, llame al 1-8	00-367-8683		
Need Mo	e right to vote elsev re Registration egistration forms at	on Forms?	date you	file this form	nte will be based or n will notify you of y		表格,	料:如果你有興趣索耶 清電 1 - 800 - 367-86	683		
offices and po	st offices or at any c all 1-800-FOR-VOT	county board of	eligibility		will notify you of y	our		: 한국어 양식을 원 167-8683 으로 전화히			
1		ON REQU	REMENTS			т	COMPI	ETE THIS FORM			
Your identity provide identi DMV number	nust be verified pric ication when you vo (driver's license ni	or to election da ote. Your identity umber or non-d	y, so that you will n / can be verified thr river ID number),	ough your or the last	you do not have of your social s	ave e a c ecui	a current DM current DMV r rity number.	V number, you must provi number, you must provide	de that number. If the last four digits		
application.	your social securi				when you last	/ote	d, put a quest	before, write "None." If yo tion mark (?). If you voted ime. If not, write "Same."			
identification may provide	when you vote for the include a valid photon	ne first time. Sar oto ID, a currer	nples of the identifi nt utility bill, bank	f the identification you bill, bank statement, that shows your name				box only. In order to vote in a party primary, you must be lew York's 5 constituted parties.			
	a copy of any ident of this form closed		s application, be su	ire to	vote in their pri	man	andence Party y e lections.	, which permits non-enrolle	ed voters to		
	If you would li	ke an app lic at	ion for an ABSE please che	NTEE BAL	LOT or would lik esponding box t	e to elo	be an ELE w.	CTION DAY WORKER	2,		
		\sim									
Yes. I need	an application for	an Absentee Ba	lot Please	print or ty	pe in blue or bla	ck	ink □ Yes	, I would like to be an E	ection Day worker		
Are you a U 1 Ye	. S. citizen? s		2 Will you be If you answ	18 years old Yes	on or before election	on da	ay?	For Board			
3 Last Name		First N			Middle Initial		Suffix				
4 Address w	aere you live (do not	give P.O. addres	s) Aj	pt. No.	City/To	wn/\	Village	Zip Code	County		
5 Address w	iere you get your ma	il (if different fro	om above) P.	O. Box, star r	oute, etc.		Post ()ffice	Zip Code		
6 Date of Bi	th	7 Sex (cir	rcle) 8 Hor	ne Tel. Numt	per (optional)		ID Number - Check the applicable box and provide you New York DMV number				
The last yea	r you voted	_	s was (give house nu	imber, street,	and city)	If you do not have a New York DMV number, ple 9 □ Last four digits of your Social Security Number					
In county/st	ite	Under the Na	me (if different fron	n your name r	low)		🗆 I do not	have a New York Driver urity Number	s license number or a		
Choose a party Check one box only Please note: AFFIDAVIT: I swear or affirm that DEMOCRATIC PARTY In order to vote I an a citizen of the United States REPUBLICAN PARTY In a primary I will have lived in the county, city or village for at least 30 days before the election. INDEPENDENCE PARTY must be enrolled This is my signature or mark on the line below.								efore the election.			

The above information is true. I understand that if it is not true I can be convicted and fined up to \$5,000 and/or jailed for up to four years.

(Date)

(Signature or Mark in Ink)

Rev. 01/2007 Please do not write in this space

□ OTHER (write in)_

□ WORKING FAMILIES PARTY

□ I DO NOT WISH TO ENROLL IN A PARTY

New York State Voter Registration Form

parties.

*See Above





FAX COVER SHEET

To: National Voter Registration Program Coordinator **Fax:** (212) 331-4279

From:
(Job/Supplemental Nutrition Assistance Program (SNAP) Center Name and Number)
National Voter Registration
Site Code:
Subject: Weekly Agency-Based Voter Registration Transmittal Form (NVRA-03)
Total Number of Pages (Including Cover Sheet):
Attachments should noll de the NVRA-03, VI-793A, VI-909KK and the E4 Report Activity.

Week Ending _____

Total Food Stamp and/or Cash Assistance Application Interviews _____

Total Food Stamp and/or Cash Assistance Recertification Interviews _____

I have reviewed the Agency-Based Voter Registration Transmittal Form **NVRA-03** and compared it against the Recertification Recap Report **W-909KK** (Job Centers) or the **E4** Report Activity (SNAP Centers) for completeness and accuracy. I have also ensured that the number of application/recertification interviews held during the week corresponds with the number of applicants/participants offered assistance with voter registration during the week.

Signature of Center Director or Designee

Date

Congratulations on taking the first step toward registering to vote!

Answers to questions you may have ...

How do I know my registration has been received and approved?

You are not registered until your form is approved by the local board of elegrights of election cal board vou where you registered, w showing your pull location, wll mail yo election distr and to the disab led. ssible whethe /our is a board of be he local Y wi tified mation deter nine ections requires mor ot qualify at this ime. sidenc ocal board of elections u shou notification within six w if you do not i or before the election. obtain the number for To your local board of elections or further

information call 1-800-FOR-VOTE.

Is my registration permanent, and when do I need to re-register?

You need to re-register only if you move your residence address.

When are the elections and how do I find out where to vote?

Before each election in which you are eligible to vote, you will receive a notice by mail telling you the date and time of the election and your polling site location.

When are polls open?

Polls are open general election day from 6:00 a.m. to 9:00 p.m. On primary day in New York City, Nassau, Putnam, Suffolk, Westchester, Rockland, Orange and Erie counties polls are open from 6:00 a.m. to 9 p.m. In all other counties polls open from 12 noon to 9:00 p.m. on primary day.

Are there people ready to assist me at the polls? Yes. Election Inspectors at the polling place are there to assist you and will answer any questions you may have or offer instruction upon request.

How do I cast my vote at the polls?

You must sign the poll register at the inspectors' table when you enter the polling place. To cast your vote simply move the lever above or next to the name of each candidate for whom you wish to vote. Leave the lever down. You may select candidates from any line or column in which their names appear. Other than a write-in, your vote may be changed at any time before you open the curtain. Simply return the lever to the neutral position and press another lever.



appear in the voll book my nam loes not I go to vote enol h11 me de 11 Ò. by. vote w lot paper sp and mark a p per ity After valida ion lot an OD elections vour e ballot will

Is my vote secret?

Yes. Your vote is secret. The number assigned to each voter by the inspectors is not traceable and is used only as a record of how many people have signed in and voted.

What shall I do if I am away on election day or if I am ill or disabled?

If you will be away from your county on election day, or unable to appear at the polls due to illness, you may vote by mail by requesting an absentee ballot application from your county board of elections up to one week prior to the election, or one day before if requested in person. If you are permanently ill or disabled you have the right to receive an absentee ballot for each subsequent election without further application. Simply contact your county board of elections and ask for an application to be placed on the permanent absentee list.

For more information contact your county board of elections or call 1-800-FOR-VOTE

NVRA - 02 02/04

Agency-Based Voter Registration Transmittal Form	
SECTION I. [To be completed by agency site coordinator]	
NVRA 6-digit Site Code Number	
Date of Transmittal	
Applications [Number who registered to vote, changed address, name or party enrollme	ent]
Number of voter registration APPLICATIONS contained in this transmittal	
Declinations [Number received since last transmittal broken down into the following cat	tegories]
Enter the number who checked the NO box on the agency-based form OR left the form BLANK	
Enter the number who checked the ALREADY REGISTERED box on the agency-based form	
Enter the number who checked the REOUESTED AND RECEIVED A MAIL REGISTRATION FORM box on the agency-based form Other Applications [Individuals who did NOT appear at your agency office] Enter the number (if any) of voter registration forms SENT to individuals.	
SECTION II. [To be completed by county board of elections]	
Number of new registrations contained in this batch	
Number of address changes contained in this batch	
Number of enrollment changes contained in this batch	
Number of <i>name changes</i> contained in this batch	
Number of <i>duplicate registrations</i> contained in this batch	<u></u>
Number of <i>incomplete forms</i> contained in this batch	
Number of forms <i>forwarded</i> to other county boards of elections, if any	
Please use the space below to alert the NYS Board of Elections of any issues relating to this site.	

QUESTIONS? - Please call the NYS Board of Elections at (518)-474-1953

NVRA-03 10/98

Please mail the WHITE and YELLOW copies of this form to your county board of elections, retain the pink copy for your records.

NYS Agency-Based Voter Registration Form

"If you are not registered to vote where you live now, would you like to apply to register here today?" Image:								Important! Applying to register of amount of assistance If you would like help we will help you. The You may fill out the ap Información en españo Ilame al 1-800-367-868 中文資料: 若您有興起 한국어: 한국어 한국어 으로 전화 하십시오. 지다·আ거局 외국 자자 [6] 국 주 파	e that you filling ou a decision oplicatio bl: si le inf 33 চ্ছিক্নমৃণ উণ্ড -	u will be provided by ut the voter registrat in whether to seek or n form in private. aeresa obtener este for 中文資料表格,請電 원하시면 1-800-367-8	this ager ion applic accept he ormulario e : 1-800-3 3683	ncy. cation form, elp is yours. en español, 67-8683
		_										
Πı	es, I need an application fo							blue or black ink	_	on back) Yes, I would like to b	e an Elect	ion Day worker
1	Are you a U.S. citizen?					If you answered	Will you be 18 years old on or before election day? For Board Use YES NO If you answered NO, do not complete this form unless you will be 18 by the end of the year For Board Use					Only
3	Last Name			First	Nam	е		Middle Initial Suffix				
4	Address where you live (do	not g	ive P.O. box))		Apt. No.		City/Town/Village Zip Code County				
5	Address where you get you	r mai	l (if different	t than abov	e)	P.O. Box, St	ar Rou	ite, etc.	Post O	ffice	Zip	Code
6	Date of Birth	7	Sex	F	8	Telephone (optional)		Email (optional)				
10	The last year you voted Your address was (give house number, street and city) In county/state Under the name (if different from your name now)						9	ID Number (Check the applicable box and provide your numl New York State DMV number				
	Political Party							Affidavit: I swear				
I wish to enroll in a political party Democratic party Independence party Republican party Women's Equality party It Conservative party Green party Other Working Families party Ido not wish to enroll in a political party							12		ne count rements e or mark tion is tru d up to \$5	y, city or village for a to register to vote in c on the line below. ue, l understand that 5,000 and/or jailed fo	New York if it is not	state. true, I can be
	🛛 No party							Signature or Mark in i	nk	Date		

(Optional) Register to donate your organs and tissues

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Last Name								
First Name			Mic	dle l	nitia	I	Suffix	
Address								
Apt Number	City/Town/Village					Zi	p Code	
Birth Date		Se	x		М	Ľ	F	
Eye Color		He	ight			Ft		ln.

Signature

upon your death.

18 years of age or older

New Uork

/ / Date

By signing below, you certify that you are:

transplantation, research, or both;

Consent to donate all of your organs and tissues for

Authorizing the Board of Elections to provide your name and identifying information to DOH for enrollment in the Registry;

And authorizing DOH to allow access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and hospitals

Qualifications for Registration

You Can Use This Form To:

- register to vote in New York State;
- change your name and/or address, if there is a change since you last voted;
- enroll in a political party or change your enrollment.

To Register You Must:

- be a U.S. citizen;
- be 18 years old by December 31 of the year in which you file this form (note: You must be 18 years old by the date of the general, primary, or other election in which you want to vote.);
- be a resident of the County, or of the City of New York at least 30 days before an election;
- not be in jail or on parole for a felony conviction; and
- not claim the right to vote elsewhere.

Important!

If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with:

> NYS Board of Elections 40 North Pearl St, Suite 5 Albany, NY 12207-2729 Telephone: 1-800-469-6872; TDD/TTY users contact the New York State Relay at 711; or visit our web site - www.elections.ny.gov

Your decision to register will remain confidential and will be used only for voter registration purposes. Anyone not choosing to register to vote and/ or information regarding the office to which the application was submitted will remain confidential, to be used only for voter registration purposes.

Verifying your identity

We will try to check your identity before Election Day, through the DMV number (driver's license number or non-driver ID number), or the last four digits of your social security number, which you will fill in Box 9.

If you do not have a DMV or Social Security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form.

If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

To complete this form:

It is a crime to procure a false registration or to furnish false information to the Board of Elections.

Box 9: You must make one selection. For questions refer to Verifying your identity above.

Box 10: If you have never voted before, write "None". If you can't remember when you last voted, put a question mark (?). If you voted before under a different name, put down that name. If not, write "Same".

Box 11: Check one box only. Political party enrollment is optional but that, in order to vote in a primary election of a political party, a voter must enroll in that political party, unless state party rules allow otherwise.



This office is a National Voter Registration Act voter registration site.

We will be offering you the opportunity to register to vote today and each time you visit us. We will be glad to help you fill out the form.

If you have questions about the NVRA, call 1-800-4NY-NVRA. 1-800-469-6872

POST-101(E) (Produced by NYS Board of Elections)



Esta oficina es un lugar de inscripción de votantes bajo la ley Nacional de Inscripción de votantes (NVRA).

Le estamos ofreciendo la oportunidad de inscribirse para votar, hoy y cada vez que nos visite. Nos complacerá ayudarle a llenar los formularios.

Si tienes más preguntas acercas de NVRA,

llame al 1-800-4NY-NVRA. 1-800-469-6872

POST-101(S) (Produced by NYS Board of Elections)



NVRA Random Check Form National Voter Registration Act

Today's Date	e:	For Week Ending:	Si	Site Code:				
Borough:		Center Name:	Si	Site Coordinator:				
Use This Fo	orm to Conduct Random Check(s) of five	(5) Individuals.		Explanation				
Person 1	(a) Were you offered the opportunity t (b) Were you provided assistance in fi	-						
Person 2	(a) Were you offered the opportunity t(b) Were you provided assistance in fi							
Person 3	(a) Were you offered the opportunity t(b) Were you provided assistance in fi							
Person 4	(a) Were you offered the opportunity t (b) Were you provided assistance in fi							
Person 5	(a) Were you offered the opportunity t (b) Were you provided assistance in fi							



Formulario de Control Disperso de NVRA Ley Nacional de Registro de Votantes

Fecha de Ho	у:	Para la Semana que Termina en:	Código del Local:
Condado:		Nombre del Centro:	Coordinador del Local:
Use Este Fo	rmulario para Realizar Controles Aleato	prios de (5) Personas.	Explicación
Persona 1	(a) ¿Se le ofreció la oportunidad de i (b) ¿Se le ofreció ayuda para llenar e	ncribirse para votar el día de hoy?	
Persona 2	(a) ¿Se le ofreció la oportunidad de i (b) ¿Se le ofreció ayuda para llenar e		
Persona 3	(a) ¿Se le ofreció la oportunidad de i (b) ¿Se le ofreció ayuda para llenar e	ncribirse para votar el día de hoy?	
Persona 4	(a) ¿Se le ofreció la oportunidad de i (b) ¿Se le ofreció ayuda para llenar e	ncribirse para votar el día de hoy? este formulario?	
Persona 5	(a) ¿Se le ofreció la oportunidad de i (b) ¿Se le ofreció ayuda para llenar e	ncribirse para votar el día de hoy? este formulario?	



Recertification Recap Report

Job Ce	nter:																1.	Recertification	n Schedule (From Recert	fication Lis	sting):				
																	2.	Plus Cases A	dvanced			_				
Month:																	3.	Total Cases S	Scheduled (T	otal of 1 + 2)		_				
Group:																	4.	Completed P	revious Mont	h		_				
																	5.	Cases Closed	b			_				
																	6.	Cases ATO'D)			_				
																	7.	Temporary E	xclusion			_				
Legen	d:																8.	Cases Waive	d			_				
	rviewed																9.	Total Cases [Dropped (4 +	5 + 6 + 7 + 8	3)	_				
C Cor	npleted												_			_	10.	Net Recertif	ications Sche	eduled (3 - 9)		_				
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	ses		+ 2)	ţ					- 8)	sı - 9)	Ending	Ending	Ending	Ending	Ending	Ending	Ending	Ending	Ending	Ending		Ending				
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1	Number of Cases on WIN32X	Advance	Total Cases Scheduled (1	Completed Previous Month	Closed	ΑΤΟ'D	Temporary Exclusion	Waived	Total Cases Dropped (4 + 5 + 6 + 7 + 8)	Net Recertifications Scheduled (3 – 9)	I	c		c		c	1	с	1	С	FFR Comp	FFR Comp	pleted	Non-	FFR/	
1	Number on WIN3	Advance	Total Ca: Schedule	Complet Previous	Closed	ATO'D	Tempora Exclusio	Waived	Total Cas Dropped (4 + 5 + 6	Net Recertifi Schedule	I	c		c		c	1	С	1	С			pleted	Non-	FFR/	
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