



# OFFICE OF POLICY, PROCEDURES, AND TRAINING

James K. Whelan, Executive Deputy Commissioner

Stephen Fisher, Assistant Deputy Commissioner  
Office of Procedures

## POLICY DIRECTIVE #16-15-OPE

*(This Policy Directive Replaces PD #16-12-OPE)*

### REVISIONS TO VOTER REGISTRATION PROCESS

<b>Date:</b> July 25, 2016	<b>Subtopic(s):</b> Voter Registration
<b>AUDIENCE</b>	The instructions in this policy directive are for staff in all Job Centers, Non-Cash Assistance (NCA) Supplemental Nutrition Assistance Program (SNAP) Centers, and are informational for all other staff.
<b>REVISIONS TO THE PRIOR DIRECTIVE</b>	This policy directive has been revised to: <ul style="list-style-type: none"> <li>Inform staff that the Mail-in Voter Registration Form (<b>Attachment C</b>) is now available in the following languages: English, Spanish, Arabic, Bengali, Chinese, French, Haitian/Creole, Korean, Russian, and Urdu.</li> </ul>
<b>POLICY</b> Revised Mail-in voter registration forms ( <b>Attachment C</b> ) should be sent directly to the Board of Elections by the applicant/participant.	The adult (an individual 18 years of age or older) <u>casehead</u> for every Cash Assistance (CA) and SNAP household must be offered the opportunity to register to vote. This can be done by giving him/her form <b>NVRA-05</b> during the application, recertification or when reporting a change. The Mail-in Voter Registration Form ( <b>Attachment C</b> ) should be offered to any adult household member and is available in multi-languages if they do not wish to register to vote at the Center. <p><b>Note:</b> Voter registration services may also be offered to a 17-year-old household member who will turn 18 years old before the election date.</p>
<b>BACKGROUND</b>	The National Voter Registration Act of 1993 (NVRA) is a part of legislation that expanded voting rights by requiring state governments to offer voter registration opportunities at all offices that provide public service and all offices that provide state-funded programs primarily engaged in providing services to persons with disabilities. Each applicant for any of these services, renewal of services, or address

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

changes must be provided with a voter registration form. The law has made it easier for all Americans to register to vote and to maintain their registration.

Chapter 659 of the Laws of 1994 conformed State law to the requirements of the NVRA of 1993 by requiring city and state agencies to offer individuals the opportunity to register to vote.

In order to become a registered voter, an individual must meet the following qualifications set forth by the New York State (NYS) Board of Elections (BOE):

- 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 during application, recertification, and at any time a household change is reported.

Applicants/participants may register to vote by using form **NVRA-05** which is attached to the back of all CA and NCA SNAP applications, recertification forms and the Mail-in Recertification/Eligibility Questionnaire Form (**M-327h**). Form **NVRA-05** is available in 5 Languages: English, Spanish, Chinese, Korean, and Bengali. Form **NVRA-05** is also available on Human Resources Administration (HRA) e-Docs.

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.

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

- Distribution of form **NVRA-05** at CSIC, FDR, PC Banks, CMU

and all interviewing areas. This form should be offered to all adult household members who are applying or recertifying for benefits and reporting a household change. An individual who is receiving the Mail-in Voter Registration Form (**Attachment C**) should send it directly to his/her local Board of Elections office (the locations are listed on the form).

JOS/Workers must include form **NVRA-05** in all mailings containing the CA and/or SNAP application and recertification forms.

- Distribution of form **NVRA-05** to all adult household members who are applying or recertifying for benefits by mail. The JOS/Workers should request that the applicant/participant and adult household return form **NVRA-05** to the Center along with his/her application or recertification form.
- PC Banks facilitators will inform applicants via announcements that the voter registration form is available for completion if interested.

Online Process  
Refer to [PD #15-07-OPE](#) and [PD #15-30-SYS](#)

If an applicant/participant in ACCESS NYC prefers, the SNAP application/recertification (**LDSS-4826**) applications are available online with the voter registration form. These forms can be printed in the applicant/participant's home or other locations where printing is available.

**Reminder:** The JOS/Workers must never scan/index the voter registration forms into the electronic case record.

Mandated Signage  
See [PD #12-18-OPE](#) and [PB #16-46-OPE](#)

Center Directors 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.

### Completing the Voter Registration Form

If the applicant/participant would like to complete a voter registration form in the Center, the JOS/Workers must provide form **NVRA-05** and

- ask the individual to check the “YES” box of Form **NVRA-05**, sign (in blue or black ink only), put the date and print his/her name in the upper left corner;
- check to ensure the following sections are complete and contain clearly printed information:
  - Citizenship status
  - Be at least 18 years old on or before election day
  - 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
- Gender
- ID Number (NYS DMV or Last four digits of the SSN)
- Information provided on the last year voted
- Political Party
- Affidavit (Signature or Mark in ink and Date)

**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 (**Attachment C**). If the applicant/participant insists on submitting a form with missing information, the JOS/Workers must accept it and forward the form to the Voter Registration Liaison.

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

**Note:** All signed and dated voter registration forms must be forwarded to the Voter Registration Liaison.

See Cash Assistance  
Program Eligibility  
Mailer [PD 09-30-OPE](#)

When a participant returns the Mail-in Recertification/Eligibility Questionnaire Form (**M-327h**) with the completed Voter Registration Form (**NVRA-05**), Income Clearance Program (ICP)/Office of Central Processing (OCP) staff must separate and forward the **NVRA-05** Form to the ICP/OCP Voter Registration Liaison. When the participant returns the Voter Registration Form (**NVRA-05**) separately, the ICP/OCP staff must forward the **NVRA-05** Form to the ICP/OCP Voter Registration Liaison. The ICP/OCP Voter Registration Liaison will then forward the **NVRA-05** Forms to the National Voter Registration Program Coordinator.

Individuals referred by a community-based organization, who bring a pre-typed black and white CA application (**LDSS-2921**), CA recertification (**LDSS-3174**) or SNAP application/recertification (**LDSS-4826**), 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.

Video Conferencing  
[CD #15-21](#)

Applicants/participants who are hard of hearing can request Video Conferencing for assistance to complete the voter registration form at a designated Center. Sign language interpretation is available via on-demand video conference calls, using a high-speed internet connection.

When an applicant/participant declines to register to vote, have him/her complete one of the following if he/she:

- does not want to register, check the box “No” on the **NVRA-05** Form and sign, date and print his/her name on the form.
- is already registered, check the box “Already Registered” on **NVRA-05** Form and sign, date and print his/her name on the form.
- wants to mail the voter’s registration form directly to the Board of Elections, check the box “I asked for a mail registration form” on the **NVRA-05** Form and sign, date and print his/her name on the form. The JOS/Worker must provide the individual a Mail-in Voter Registration Form (**Attachment C**) and form **NVRA-02**.

If the individual refuses to complete any part of the form, do not attempt to coerce the individual to complete the form. The JOS/Workers will collect the **NVRA-05** Form from the applicant/participant and forward the form to the Voter Registration Liaison.

Job and NCA SNAP Center staff are prohibited from:

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

- 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.

The Role of the Voter Registration Liaison

The Voter Registration Liaison is a staff member designated by the Center Director, who acts as a liaison between the Center and the Family Independence Administration (FIA) National Voter Registration (NVR) Program Coordinator. Every Job and NCA SNAP Center should be staffed with a Voter Registration Liaison and a backup Liaison.

Each year the Voter Registration Liaison and backup Liaison must attend a training course conducted by the NYS Board of Elections. Therefore, the Center Director should immediately notify the FIA NVR Program Coordinator anytime a new Voter Registration Liaison or backup Liaison has been designated.

The Voter Registration Liaison must also receive training from the FIA NVR Program Coordinator as needed. The Voter Registration Liaison

is responsible for ordering voter registration materials from the New York State Board of Elections.

Each day the Voter Registration Liaison must:

- Collect the completed **NVRA-05** Forms with the signature and date, 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 service to individuals;
- Retain a file of **NVRA-05** Forms (No/refusal to register, mail-in requests and already registered) that have been signed and dated 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 Liaison must:

- obtain the total number of applications received in the Center during the previous week using the POS Application Tracking and Aging reports;
- obtain the total number of applicants and participants (recertifying or reporting a household change) who entered the Center during the previous week;
- obtain copies of the Recertification Recap Report Form (**W-909KK**) from the Deputy Director of the Job Center, or the E4 Weekly Activity Report (**Attachment B**) from the NCA SNAP Center Manager or Designee for the previous week;
- utilize the above-mentioned reports to compare the total number of application and recertification interviews for the

Under no circumstance should a completed Voter Registration form be held for more than 10 days.

previous week at the Center as of the close of business on the previous Friday;

- count and separate the **NVRA-05** Forms into the following four categories:
  - Completed voter registration forms;
  - NVR declinations/blanks;
  - NVR forms with the “Already Registered” box checked off;
  - NVR mail-in form requests;
  
- Voter Registration Liaison must survey five 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 the opportunity to register to vote. The interviews should be brief and limited only to the questions listed on the survey. 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 (or Wednesday, if Tuesday is a holiday);
- 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;
- fax a cover memo (**Attachment D**) signed by the Center Director or Designee along with copies of the **NVRA-03**, **W-793A** and **W-909KK** or the E4 Weekly Activity Report (**Attachment B**) to the FIA NVR Program Coordinator; 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 yellow 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 **NVRA-03** Form 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.

National Voter Registration Program Coordinator

The FIA NVR Program Coordinator is listed below:

Sarah Wong (NVR Program Coordinator)  
 Telephone: (929) 221-6694  
 e-mail: [wongsa@hra.nyc.gov](mailto:wongsa@hra.nyc.gov)

Pamela Gray (NVR Project Coordinator)  
 Telephone: (929) 221-7408  
 e-mail: [graypa@hra.nyc.gov](mailto:graypa@hra.nyc.gov)

FIA Office of Project Support  
 4 World Trade Center  
 150 Greenwich Street, 36th Floor  
 New York, NY 10007  
 Fax: (929) 221-0761

Location of the FIA  
 NVR Coordinator

The NVR Program Coordinator must review all **W-793A** and **NVRA-03** Forms against the **W-909KK** Form (Job Centers) or the E4 Weekly Activity Report (**Attachment B**) (NCA SNAP Centers) for accuracy and completeness.

**PROGRAM IMPLICATIONS**

Paperless Office System (POS) Implications      Voter registration forms cannot be completed in POS; therefore, the JOS/Worker must be sure to print a copy of Form **NVRA-05** and provide it to applicants/participants along with the CA application (**LDSS-2921**), CA recertification (**LDSS-3174**) and/or SNAP application/recertification (**LDSS-4826**) form.

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 HARD OF HEARING IMPLICATIONS**      For Limited English Proficient (LEP) and hard of hearing applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD #14-24-OPE](#) and [PD #14-18-OPE](#).



**FAIR HEARING IMPLICATIONS**

There are no fair hearing implications.


**REFERENCES**

94-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](http://www.vote.nyc.ny.us/register.html)  
 HRA Procedure #98-5

**RELATED ITEMS**

[CD #15-21](#)  
[PB #16-46-OPE](#)  
[PD #09-30-OPE](#)  
[PD #12-18-OPE](#)  
[PD #15-07-OPE](#)  
[PD #15-30-SYS](#)

**ATTACHMENTS**

 Please use Print on Demand to obtain copies of forms.

<b>Attachment A</b>	NYS Agency-Based Voter Registration Supply Order Form
<b>Attachment B</b>	E4 Weekly Activity Report
<b>Attachment C</b>	NYS Mail-In Voter Registration Form
<b>Attachment D</b>	Fax Cover Sheet
<b>NVRA-02</b>	Voter Information Card (Rev. 2/04)
<b>NVRA-03</b>	Agency-Based Voter Registration Transmittal Form (10/98)
<b>NVRA-05</b>	New York State Agency-Based Voter Registration Form (Rev. 2/15)
<b>POST-101</b>	NYS Agency-Based Voter Registration Poster (4/23/12)

<b>POST-101 (S)</b>	NYS Agency-Based Voter Registration Poster (Spanish) (4/23/12)
<b>W-793A</b>	NVRA Random Check Form (Rev. 7/1/08)
<b>W-793A (S)</b>	NVRA Random Check Form (Spanish) (Rev. 7/1/08)
<b>W-909KK</b>	Recertification Recap Report (Rev. 7/1/08)

**NYS Agency-Based Voter Registration**

**Supply Order Form**

Item	Quantity	
Agency Employee Guide		
Counter Tents		
Transmittal Forms		
Transmittal Envelopes	Large (10"X13")	
	Small (4 ¼"X11")	
Agency-Based Voter Registration Form (100 per pack)	Language	Quantity (order by pack)
	English	
	Spanish	
	Chinese	
	Korean	
Voter Registration Forms Mail Registration - dot coded (100 per pack)	Language	Quantity (order by pack)
	English	
	Spanish	
	Chinese	
	Korean	
Voter Card Informational Handout (100 per pack)	Language	Quantity (order by pack)
	English	
	Spanish	
	Chinese	
	Korean	
Poster	Language	Quantity
	English	
	Spanish	
	Chinese	
	Korean	

NVRA Site Code # \_\_\_\_\_

Alternate Shipping Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

New York State Board of Elections  
 40 Steuben Street  
 Albany, New York 12207-2108  
 (518) 474-1953  
 Fax (518) 473-8315



June 2007

Center: \_\_\_\_\_

Week Ending: \_\_\_\_\_

			MON	TUES	WED	THURS	FRI	SAT	TOTAL
<b>RECEPTION INTAKE ACTIVITY</b>									
<b>Reception Intake Activity</b>		Pre-screen Activity							0
		Telephone Activity							0
		In Person Inquiry							0
		FTK [ RJ ]							0
		FTR [ Y10 ]							0
		ID Card Replacement							0
		AFIS							0
		<b>TOTAL</b>		0	0	0	0	0	0
<b>APPLICATION ACTIVITY</b>									
<b>Reception Activity (From W123C)</b>		Prior Appointments Scheduled							0
		Prior Appointments Kept							0
		Walk-Ins							0
		<b>Total-Already Programmed</b>	0	0	0	0	0	0	0
<b>Interview Activity (From W132E)</b>		Cases Deferred							0
	a	Cases Completed-Eligible							0
	b	Cases Completed-Ineligible							0
	c	Total New Applications Completed (a+b)	0	0	0	0	0	0	0
	d	Deferred Completed-Eligible							0
	e	Cases Completed-Ineligible							0
	f	Total Deferrals completed (d+e)	0	0	0	0	0	0	0
		<b>Total Decisions Made (c+f)</b>	0	0	0	0	0	0	0
	<b>Total Eligible (a+d)</b>	0	0	0	0	0	0	0	
<b>RECERTIFICATION ACTIVITY</b>									
<b>Reception Activity (From W123C)</b>		Prior Appointments Scheduled							0
		Prior Appointments Kept							0
		Cases Deferred							0
<b>Interview Activity (From W132E)</b>	a	Cases Completed-Eligible							0
	b	Cases Completed-Ineligible							0
	c	Total New Recert Completed (a+b)	0	0	0	0	0	0	0
	d	Deferred Completed-Eligible							0
	e	Cases Completed-Ineligible							0
	f	Total Deferrals Completed (d+e)	0	0	0	0	0	0	0
		<b>Total Decisions Made (c+f)</b>	0	0	0	0	0	0	0
		<b>Total Eligible (a+d)</b>	0	0	0	0	0	0	0
<b>MPU/SERVICE ACTIVITY</b>									
<b>Source (From W132D)</b>		In Person							0
		Mail							0
		Phone							0
		Matches							0
		<b>TOTAL</b>	0	0	0	0	0	0	0
<b>Type of Action (From W132E)</b>		Change Action							0
		Budget/Record Review							0
		Application Completion Service							0
		CBICs/ID Replacement							0
		Reopen							0
		WMS Inquiry							0
		<b>TOTAL</b>	0	0	0	0	0	0	0
		Potential FS Claims*							0
	FS Claims packets Completed							0	
<b>FAIR HEARING ACTIVITY</b>									
		Conference							0
		ATC							0
		Resolution							0
		Packet Prep							0
		<b>TOTAL</b>	0	0	0	0	0	0	0

\* Number of W140M's completed

Prepared By: \_\_\_\_\_

Date: \_\_\_\_\_



# New York State Voter Registration Form

## Register to vote

With this form, you register to vote in elections in New York State. You can also use this form to:

- change the name or address on your voter registration
- become a member of a political party
- change your party membership

### To register you must:

- be a US citizen;
- be 18 years old by the end of this year;
- not be in prison or on parole for a felony conviction;
- not claim the right to vote elsewhere.

## Send or deliver this form

Fill out the form below and send it to your county's address on the back of this form, or take this form to the office of your County Board of Elections.

Mail or deliver this form at least **25 days before** the election you want to vote in. Your county will notify you that you are registered to vote.

### Questions?

Call your County Board of Elections listed on the back of this form or 1-800-FOR-VOTE (TDD/TTY Dial 711)

Find answers or tools on our website [www.elections.ny.gov](http://www.elections.ny.gov)

## Verifying your identity

We'll 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'll fill in below.

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—be sure to tape the sides of the form closed.

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

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-8683

中文資料: 若您有興趣索取中文資料表格, 請電: 1-800-367-8683

한국어: 한국어 양식을 원하시면 1-800-367-8683 으로 전화 하십시오.

যদি আসনি এই ফর্মটি বাংলাতে পেতে চান তাহলে 1-800-367-8683 নম্বরে ফোন করুন

**!** It is a crime to procure a false registration or to furnish false information to the Board of Elections. Please print in blue or black ink.

<b>1</b>	Are you a citizen of the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	For board use only
	If you answer <i>No</i> , you cannot register to vote.	
<b>2</b>	Will you be 18 years of age or older on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If you answer <i>No</i> , you cannot register to vote unless you will be 18 by the end of the year.	

<b>3</b>	Last name	Suffix
	First name	Middle Initial

<b>4</b>	Birth date	<input type="text"/>	<b>5</b>	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
	Items 5, 6 & 7 are optional			<b>6</b>	Phone
			<b>7</b>		Email

<b>8</b>	Address (not P.O. box)	
	Apt. Number	Zip code
	City/Town/Village	
	New York State County	

<b>9</b>	Address or P.O. box	
	P.O. Box	Zip code
	City/Town/Village	

<b>10</b>	Have you voted before? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>11</b>	What year?
			<input type="text"/>

<b>12</b>	Your name was
	Your address was
	Your previous state or New York State County was

<b>13</b>	<input type="checkbox"/> New York State DMV number
	<input type="checkbox"/> Last four digits of your Social Security number
	<input type="checkbox"/> I do not have a New York State driver's license or a Social Security number.

<b>14</b>	<b>I wish to enroll in a political party</b> <input type="checkbox"/> Democratic party <input type="checkbox"/> Republican party <input type="checkbox"/> Conservative party <input type="checkbox"/> Green party <input type="checkbox"/> Working Families party <input type="checkbox"/> Independence party <input type="checkbox"/> Women's Equality party <input type="checkbox"/> Reform party <input type="checkbox"/> Other _____	<b>16</b>	<b>Affidavit: I swear or affirm that</b> <ul style="list-style-type: none"> <li>• I am a citizen of the United States.</li> <li>• I will have lived in the county, city or village for at least 30 days before the election.</li> <li>• I meet all requirements to register to vote in New York State.</li> <li>• This is my signature or mark in the box below.</li> <li>• 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.</li> </ul>
	<b>I do not wish to enroll in a political party</b> <input type="checkbox"/> No party		Sign <input type="text"/> Date <input type="text"/>

<b>15</b>	<input type="checkbox"/> I need to apply for an Absentee ballot.
	<input type="checkbox"/> I would like to be an Election Day worker.

# Address and stamp this section

Your address

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Place  
First-Class  
Stamp  
Here

Before mailing,  
remove tape,  
fold and seal

Your County Board of Elections address (select from below)

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**New York City**  
32 Broadway, 7th Fl.  
New York, NY 10004  
(212) 487-5300

**Albany**  
32 North Russell Road  
Albany, NY 12206  
(518) 487-5060

**Allegany**  
6 Schuyler St.  
Belmont, NY 14813  
(585) 268-9294

**Broome**  
Government Plaza  
60 Hawley St.  
PO Box 1766  
Binghamton, NY  
13902  
(607) 778-2172

**Cattaraugus**  
207 Rock City St.  
Suite 100  
Little Valley, NY 14755  
(716) 938-2400

**Cayuga**  
157 Genesee St.  
(Basement)  
Auburn, NY 13021  
(315) 253-1285

**Chautauqua**  
7 North Erie St.  
Mayville, NY 14757  
(716) 533-4580

**Chemung**  
378 South Main St.  
PO Box 588  
Elmira, NY 14902  
(607) 737-5475

**Chenango**  
5 Court St.  
Norwich, NY 13815  
(607) 337-1760

**Clinton**  
Cnty Government Ctr.  
Ste. 104  
137 Margaret St.  
Plattsburgh, NY 12901  
(518) 565-4740

**Columbia**  
401 State St.  
Hudson, NY 12534  
(518) 828-3115

**Cortland**  
112 River St.  
Suite 1  
Cortland, NY 13045  
(607) 753-5032

**Delaware**  
3 Gallant Ave.  
Delhi, NY 13753  
(607) 746-2315

**Dutchess**  
47 Cannon St.  
Poughkeepsie, NY  
12601  
(845) 486-2473

**Erie**  
134 W. Eagle St.  
Buffalo, NY 14202  
(716) 858-8891

**Essex**  
7551 Court St.  
PO Box 217  
Elizabethtown, NY  
12932  
(518) 873-3474

**Franklin**  
355 West Main St.  
Ste. 161  
Malone, NY 12953  
(518) 481-1663

**Fulton**  
2714 St. Hwy 29  
Ste. 1  
Johnstown, NY 12095  
(518) 736-5526

**Genesee**  
County Building #1  
15 Main St.  
Batavia, NY 14021  
(585) 344-2550

**Greene**  
411 Main St.  
Ste. 437  
Catskill, NY 12414  
(518) 719-3550

**Hamilton**  
Rte. 8  
PO Box 175  
Lake Pleasant, NY  
12108  
(518) 548-4684

**Herkimer**  
109 Mary St.  
Ste. 1306  
Herkimer, NY 13350  
(315) 867-1102

**Jefferson**  
175 Arsenal St.  
Watertown, NY 13601  
(315) 785-3027

**Lewis**  
7660 N. State St.  
Lowville, NY 13367  
(315) 376-5329

**Livingston**  
County Govt. Ctr.  
6 Court St.  
Room 104  
Geneseo, NY 14454  
(585) 243-7090

**Madison**  
County Office Bldg.  
N. Court St.  
PO Box 666  
Wampsville, NY  
13163  
(315) 366-2231

**Monroe**  
39 Main St. W.  
Rochester, NY 14614  
(585) 753-1550

**Montgomery**  
Old Courthouse  
9 Park St.  
PO Box 1500  
Fonda, NY 12068  
(518) 853-8180

**Nassau**  
240 Old Country Rd.  
5th Fl.  
Mineola, NY 11501  
(516) 571-2411

**Niagara**  
111 Main St.  
Ste. 100  
Lockport, NY 14094  
(716) 438-4040

**Oneida**  
Union Station  
321 Main St.  
3rd Fl.  
Utica, NY 13501  
(315) 798-5765

**Onondaga**  
1000 Erie Blvd West  
Syracuse, NY 13204  
(315) 435-3312

**Ontario**  
74 Ontario St.  
Canandaigua, NY  
14424  
(585) 396-4005

**Orange**  
75 Webster Ave  
PO Box 30  
Goshen, NY 10924  
(845) 360-6500

**Orleans**  
14012 State Rte. 31  
Albion, NY 14411  
(585) 589-3274

**Oswego**  
185 E. Seneca St.  
Box 9  
Oswego, NY 13126  
(315) 349-8350

**Otsego**  
Ste. 2  
140 County Hwy. 33W  
Cooperstown, NY  
13326  
(607) 547-4247

**Putnam**  
25 Old Route 6  
Carmel, NY 10512  
(845) 808-1300

**Rensselaer**  
Ned Pattison  
Government Ctr.  
1600 Seventh Ave.  
Troy, NY 12180  
(518) 270-2990

**Rockland**  
11 New Hempstead Rd.  
New City, NY 10956  
(845) 638-5172

**St. Lawrence**  
48 Court St.  
Canton, NY 13617  
(315) 379-2202

**Saratoga**  
50 W. High St.  
Ballston Spa, NY  
12020  
(518) 885-2249

**Schenectady**  
388 Broadway, Ste. E  
Schenectady, NY  
12305  
(518) 377-2469

**Schoharie**  
County Office Bldg.  
284 Main St.  
PO Box 99  
Schoharie, NY 12157  
(518) 295-8388

**Schuyler**  
County Office Bldg.  
105 9th St., Unit 13  
Watkins Glen, NY  
14891  
(607) 535-8195

**Seneca**  
One DiPronio Dr.  
Waterloo, NY 13165  
(315) 539-1760

**Steuben**  
3 E. Pulteney Sq.  
Bath, NY 14810  
(607) 664-2260

**Suffolk**  
Yaphank Ave.  
PO Box 700  
Yaphank, NY 11980  
(631) 852-4500

**Sullivan**  
Gov't. Ctr.  
100 North St.  
PO Box 5012  
Monticello, NY 12701  
(845) 807-0400

**Tioga**  
1062 State Rte. 38  
P.O. Box 306  
Owego, NY 13827  
(607) 687-8261

**Tompkins**  
Court House Annex  
128 E. Buffalo St.  
Ithaca, NY 14850  
(607) 274-5522

**Ulster**  
284 Wall St.  
Kingston, NY 12401  
(845) 334-5470

**Warren**  
Cnty. Municipal Ctr.  
3rd Floor  
Human Serv. Bldg  
1340 St. Rte. 9  
Lake George, NY  
12845  
(518) 761-6456

**Washington**  
383 Broadway  
Fort Edward, NY  
12828  
(518) 786-2180

**Wayne**  
7376 State Rte. 31  
PO Box 636  
Lyons, NY 14489  
(315) 946-7400

**Westchester**  
25 Quarropas St.  
White Plains, NY  
10601  
(914) 995-5700

**Wyoming**  
4 Perry Ave.  
Warsaw, NY 14569  
(585) 786-8931

**Yates**  
Ste. 1124  
417 Liberty St.  
Penn Yan, NY 14527  
(315) 536-5135

## (Optional) Register to donate your organs and tissues

If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health (DOH) *Donate Life™* Registry online at [www.nyhealth.gov](http://www.nyhealth.gov) or provide your name and address below.

You will receive a confirmation letter from DOH, which will also provide you an opportunity to limit your donation.



Last name \_\_\_\_\_

First name \_\_\_\_\_

Middle Initial | | Suffix \_\_\_\_\_

Address \_\_\_\_\_

Apt. Number \_\_\_\_\_ Zip code | | | | | | | |

City \_\_\_\_\_

Birth date | M | M | / | D | D | / | Y | Y | Y | Y |

Sex  M  F

Eye color \_\_\_\_\_ Height | | Ft. | | In.

By signing below,  
you certify that you are:

- 18 years of age or older;
- consenting to donate all of your organs and tissues for transplantation, research, or both;
- 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 upon your death.

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Sign

Date



# FAX COVER SHEET

**To:** National Voter Registration Program Coordinator

**Fax:** (929) 221-0761

**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 include the **NVRA-03**, **W-793A**, **W-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**

(front)

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 elections. Once registered, your local board of elections, not the agency where you registered, will mail you a card showing your poll location, election district and whether your site is accessible to the disabled. You will be notified if the local board of elections requires more information to determine residency or if you do not qualify at this time. You should contact your local board of elections if you do not receive notification within six weeks or before the election. To obtain the number for 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.

SAMPLE



***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.

***What if my name does not appear in the poll book when I go to vote?***

If your name does not appear in the poll book you may vote by paper ballot. To vote by affidavit, you will sign an oath on a special paper ballot envelope stating your eligibility and mark a paper ballot and seal it in the envelope. After validation of your eligibility by the board of elections your ballot will be counted.

***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**

# Agency-Based Voter Registration Transmittal Form

## SECTION I. [To be completed by agency site coordinator]

NVRA 6-digit Site Code Number

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Date of Transmittal

### Applications [Number who registered to vote, changed address, name or party enrollment]

Number of voter registration APPLICATIONS contained in this transmittal

### Declinations [Number received since last transmittal broken down into the following categories]

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 **REQUESTED 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 *name changes* contained in this batch

Number of *duplicate registrations* contained in this batch

Number of *incomplete forms* contained in this batch

Number of forms *forwarded* 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?"

- YES** If you checked **YES**, please complete the **VOTER REGISTRATION APPLICATION** below
- NO** because I choose not to register **OR**
- I am already registered at my current address **OR**
- I asked for and received a mail registration form

*If you do not check any box, you will be considered to have decided not to register to vote at this time.*

Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please Print Name \_\_\_\_\_

### Important!

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private.

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-8683

中文資料: 若您有興趣索取中文資料表格, 請電: 1-800-367-8683

한국어: 한국어 한국어 양식을 원하시면 1-800-367-8683 으로 전화 하십시오.

যদি আপনি এই ফর্মটি ইংরেজীতে পেতে চান তাহলে 1-800-367-8683 নম্বরে ফোন করুন

Rev. 2/2015

## VOTER REGISTRATION APPLICATION (instructions on back)

Yes, I need an application for an Absentee Ballot

**Please print or type in blue or black ink**

Yes, I would like to be an Election Day worker

<b>1</b>	<b>Are you a U.S. citizen?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If you answered NO, do not complete this form</small>	<b>2</b>	<b>Will you be 18 years old on or before election day?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If you answered NO, do not complete this form unless you will be 18 by the end of the year</small>	<b>For Board Use Only</b>	
<b>3</b>	Last Name _____		First Name _____	Middle Initial _____	Suffix _____
<b>4</b>	Address where you live (do not give P.O. box) _____		Apt. No. _____	City/Town/Village _____	Zip Code _____ County _____
<b>5</b>	Address where you get your mail (if different than above) _____		P.O. Box, Star Route, etc. _____	Post Office _____	Zip Code _____
<b>6</b>	Date of Birth _____	<b>7</b>	Sex <input type="checkbox"/> M <input type="checkbox"/> F	<b>8</b>	Telephone (optional) _____ Email (optional) _____
<b>10</b>	The last year you voted _____	Your address was (give house number, street and city) _____		<b>9</b>	<b>ID Number</b> (Check the applicable box and provide your number) <input type="checkbox"/> New York State DMV number — — — — — <input type="checkbox"/> Last four digits of your Social Security number — — — — <input type="checkbox"/> I do not have a New York State DMV or Social Security number
	In county/state _____	Under the name (if different from your name now) _____			
<b>11</b>	<b>Political Party</b> <b>I wish to enroll in a political party</b> <input type="checkbox"/> Democratic party <input type="checkbox"/> Independence party <input type="checkbox"/> Republican party <input type="checkbox"/> Women's Equality party <input type="checkbox"/> Conservative party <input type="checkbox"/> Reform party <input type="checkbox"/> Green party <input type="checkbox"/> Other _____ <input type="checkbox"/> Working Families party <b>I do not wish to enroll in a political party</b> <input type="checkbox"/> No party			<b>12</b>	<b>Affidavit: I swear or affirm that</b> <ul style="list-style-type: none"> <li>I am a citizen of the United States.</li> <li>I will have lived in the county, city or village for at least 30 days before the election.</li> <li>I will meet all requirements to register to vote in New York State.</li> <li>This is my signature or mark on the line below.</li> <li>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.</li> </ul>
	Signature or Mark in ink _____				Date _____ / _____ / _____

### (Optional) Register to donate your organs and tissues

Last Name _____			
First Name _____		Middle Initial _____	Suffix _____
Address _____			
Apt Number _____	City/Town/Village _____		Zip Code _____
Birth Date _____		Sex	<input type="checkbox"/> M <input type="checkbox"/> F
Eye Color _____		Height	Ft. _____ In. _____

By signing below, you certify that you are:

- 18 years of age or older
- Consent to donate all of your organs and tissues for transplantation, research, or both;
- 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 upon your death.



Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## 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](http://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.

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## 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.

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**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**



**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 ayudarlo a  
llenar los formularios.**

**Si tienes más preguntas acerca de NVRA,  
llame al 1-800-4NY-NVRA.  
1-800-469-6872**

## NVRA Random Check Form National Voter Registration Act

Today's Date: \_\_\_\_\_ For Week Ending: \_\_\_\_\_ Site Code: \_\_\_\_\_

Borough: \_\_\_\_\_ Center Name: \_\_\_\_\_ Site Coordinator: \_\_\_\_\_

**Use This Form to Conduct Random Check(s) of five (5) Individuals.**

**Explanation**

Use This Form to Conduct Random Check(s) of five (5) Individuals.		Explanation
<b>Person 1</b>	(a) Were you offered the opportunity to register to vote today? _____ (b) Were you provided assistance in filling out the form? _____	
<b>Person 2</b>	(a) Were you offered the opportunity to register to vote today? _____ (b) Were you provided assistance in filling out the form? _____	
<b>Person 3</b>	(a) Were you offered the opportunity to register to vote today? _____ (b) Were you provided assistance in filling out the form? _____	
<b>Person 4</b>	(a) Were you offered the opportunity to register to vote today? _____ (b) Were you provided assistance in filling out the form? _____	
<b>Person 5</b>	(a) Were you offered the opportunity to register to vote today? _____ (b) Were you provided assistance in filling out the form? _____	

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

Fecha de Hoy: \_\_\_\_\_ Para la Semana que Termina en: \_\_\_\_\_ Código del Local: \_\_\_\_\_

Condado: \_\_\_\_\_ Nombre del Centro: \_\_\_\_\_ Coordinador del Local: \_\_\_\_\_

**Use Este Formulario para Realizar Controles Aleatorios de (5) Personas.**

**Explicación**

<b>Persona 1</b>	(a) ¿Se le ofreció la oportunidad de inscribirse para votar el día de hoy? _____ (b) ¿Se le ofreció ayuda para llenar este formulario? _____	
<b>Persona 2</b>	(a) ¿Se le ofreció la oportunidad de inscribirse para votar el día de hoy? _____ (b) ¿Se le ofreció ayuda para llenar este formulario? _____	
<b>Persona 3</b>	(a) ¿Se le ofreció la oportunidad de inscribirse para votar el día de hoy? _____ (b) ¿Se le ofreció ayuda para llenar este formulario? _____	
<b>Persona 4</b>	(a) ¿Se le ofreció la oportunidad de inscribirse para votar el día de hoy? _____ (b) ¿Se le ofreció ayuda para llenar este formulario? _____	
<b>Persona 5</b>	(a) ¿Se le ofreció la oportunidad de inscribirse para votar el día de hoy? _____ (b) ¿Se le ofreció ayuda para llenar este formulario? _____	

SAMPLE



