# The College of New Jersey

Office of Records & Registration P.O. Box 7718, Ewing, NJ 08628-0718 609-771-2141

# **Voter Registration Application**

You can pick up a copy of the voter registration form (postage paid by addressee) in the lobby of the Office of Records and Registration, Green Hall 112 or download and mail your voter registration form with the appropriate postage to:

Department of State Division of Elections P.O. Box 304 Trenton, NJ 08625-9983

Or your County Commissioner's Office at:

http://www.nj.gov/state/elections/voter-registration-application.html

You can also print a <u>registration application</u> and after entering required data, **mail** it to the Commissioners of Registration office in the county where you reside. In addition, this form can be used for name and address changes.

The Commissioners of Registration cannot accept faxed copies or an electronic transmission of a voter registration form since an original signature is required.

The registrant must down load the form and send the hard copy to the Commissioner of Registration. The registration deadline to vote at the next election is 21 days prior to Election Day.

#### Who Can Register to Vote?

#### To register to vote in New Jersey you must be:

- A United States citizen.
- At least 18 years old by the next election,
- A resident of the county for 30 days before the election.

#### You are not eligible to vote if:

• You are serving a sentence or on parole or probation, as a result of a conviction of an indictable offense under state or federal law.

Note: If you are not longer serving a sentence, or no longer on parole or probation... you CAN vote in NJ by completing a new voter registration form.

You only lose your right to vote while you are serving a sentence, are on probation or parole.

If you were registered to vote before you were convicted, you must complete a new voter registration form once you have served your time.

If you are a pre-trial detainee or on bail pending appeal, you do not lose your right to vote.



# New Jersey Voter Registration Application Please print clearly in ink. All information is required unless marked optional.

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1300					-				
						Political Party Affiliation r Non-affiliation Change			FOR OFFICIAL USE ONLY
2 Are you a U.S. Citizen? Yes No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? Yes No (If No, DO NOT complete this form)									Clerk
3 Last Name First		Name		Middle Name or Initial		Suffix (ex. Jr., Sr., III)		Registration #	
4 Date of Birth Office Time St									
5 NJ Driver's Lic		f you DO NOT have a NJ Driver's License or MVC Non-Driver D, provide the last 4 digits of your Social Security Number.							
"I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number."									
6 Home Address (DO NOT use PO Box)		Apt.	Municipality		County	State	Zip Code		
7 Mailing Address if different from above		Apt.	Municipality	1	County	State	Zip Code		
8 LastAddress Registered to Vote (DONOT use POBox)		Apt.	Municipality		County	State	Zip Code	□ by mail □ in person	
Pormer Name if Making Name Change     Day Phone Number     (Optional)									
10 Do you wish to declare a political party affiliation?									
(Optional) No, I do not wish to be affiliated with any political party.									
Temale  ☐ Permale ☐ Male  Declaration - I swear or affirm that: ☐ I am a U.S. Citizen ☐ I am a U.S. Citizen ☐ I will be at least 18 years old on or before the next election ☐ on or before the next election ☐ I will have resided in the State and county at least 30 days before the next election ☐ I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws ☐ Understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1									
Signature: Sign or mark and date on line below  If applicant is unable to complete this form name and address of individual who comp									
					Name			D	ate
×					Address				
Date									
Date									
Important Instructions for sections 5, 6 and 10									
5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo id, or a document with your name and current address on it to avoid having to provide identification at the polling place.Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.									
6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.									
10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is Optional and will not affect the acceptance of your voter registration application.									
Need More Information? Check boxes below if you would like to receive more information about:									
☐ voting by mail			-	illing place ac		-			materials in this
		Vo	oting if you have a disability, ocluding visual impairment			alternative language:			

# You can register to vote if:

- You are a United States citizen
- You will be 18 years of age by the next election
- You will be a resident of the State and county 30 days before the election
- M You are NOT currently serving a sentence, probation or parole because of a felony conviction

# Registration Deadline: 21 days before an election

Your County Commissioner of Registration will notify you if your application is accepted. If it is not accepted, you will be notified on how to complete and/or correct the application.

Questions? visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)





NO POSTAGE **NECESSARY** IF MAILED IN THE

# PERMIT NO 206

POSTAGE WILL BE PAID BY ADDRESSEE

**DIVISION OF ELECTIONS PO BOX 304** TRENTON NJ 08625-9983







Important: Print out at 100% - DO NOT REDUCE. Fold as illustrated to ensure proper mailing.



Put both pages together as shown



fold top down



fold bottom up





