

## New Jersey Voter Registration Application

Please print clearly in ink. All information is required unless marked optional.

1	Check boxes ☐ New Registration ☐ Address Change ☐ Political Party Affiliation that apply: ☐ Name Change ☐ Signature Update or 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 M		liddle Name or Initial	Suffix (Jr., Sr., III)		Registration #	
4 [	Date of Birth							Office Time Stamp	
5	5 NJ Driver's License Number or MVC Non-driver ID Number  If you DO NOT have a NJ Driver's License or MVC Non-Driver  ID, 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	7 Mailing Address if different from above		Apt.	Municipality	County	State	Zip Code		
8	8 Last Address Registered to Vote (DO NOT USE PO BOX)		Apt.	Municipality	County	State	Zip Code	□ by mail □ in person	
Former Name if Making Name Change     a. Day Phone Number (Optional)									
b. E-Mail Address (Optional)									
10 Do you wish to declare a political party affiliation? ☐ Yes, the party name is									
10	(Optional)	icai party an	illation?		rty name is t wish to be affiliated		ny political p	party.	
	The der								
Signature: Sign or mark and date on lines below  If applicant is unable to complete this for name and address of individual who co							mpleted this form.		
					Date				
$ _{\mathbf{x}_{-}}$	x			e		Address			
	portant Instruction Registrants who are submittin information required by section current and valid photo ID, or identification at the polling pla	g this form by 5, or the information and comment	y mail ar mation y	nd are registering ou provide canno	g to vote for the first ti ot be verified, you will	be aske	ed to provide	a COPY of a	
	<b>Note:</b> 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)	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)	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.								
Ne	ed More Information? Che	ck boxes belo	ow if you	ı would like to re	ceive more informati	on abou	ıt:		
□ voting by mail □ becoming a poll worker			□ vot	ling place accessi ing if you have a d luding visual impa	disability,		ble election ternative lan		

## **Instructions for Completing a NJ Voter Registration Form**

For Rutgers Students Living Off Campus and Receiving Mail via the US Post Office

<u>Item 1:</u> Check appropriate box if this is a New Registration, Change of Address, Change of Name, Signature Update or Political Party Affiliation change

<u>Item 2:</u> Check box if you are a citizen and if 18 or older. If either is "No", you can not register.

<u>Item 3:</u> Enter full name (including suffix if applicable, i.e. Jr., Sr. III, IV, etc.)

**Item 4:** Enter full date of birth (Month, Day and Year)

<u>Item 5:</u> You MUST enter your Driver's License number (if you have one), or a MVC Non-Driver Number. If you have neither of these, enter the last 4 digits of your Social Security Number. If you have none of these, Swear or Affirm by checking the box. (See "Important Instructions" at bottom of the form for additional information)

<u>Item 6:</u> Enter residence address, apartment/room number, Municipality (Town), County, State, and Zip.

**Item 7:** Enter the address where you get your mail if different from Item 6

<u>Item 8:</u> Enter last address of where you were registered to vote (if previously registered <u>anywhere</u> in the United States)

<u>Item 9:</u> Enter former name only if you were previously registered under a different name.

Next to Item 9, you may optionally list your daytime or cell phone number or email address.

<u>Item 10:</u> If you wish to declare with a Political Party check "Yes" and enter the party name. (See instructions at bottom of form). If you do not wish to declare, check "No". If "NO" is checked or if you checked Yes but no party is shown, you will be entered as "Unaffiliated"

Item 11: Check the box next to your gender.

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<u>Make sure you read</u> all the legal statements in the box next to Item 11, under "**Declaration**" before you sign and date the form.

If applicant is unable to complete this form, the individual who assisted in the completion of this form **MUST print** their name, address and date.

<u>Change of Address</u>: If either of the addresses in item #6 (Dorm) or #7 (Where you receive mail) changes, a registration form must be submitted with the new address(es), checking the box "**Change of Address**" at the top of the form.

Bring or mail the original signed form to the Board of Elections so it is received/post marked by close of registration, which is 21 days before the election you wish to vote in.

**ALSO** – When you graduate, and move from the dorms, make sure you submit a registration form from your new residence in order to vote. We would also appreciate it if you notify the Board of Elections if you move out of Middlesex County.

Refer all questions to Middlesex County Board of Elections at: 732-745-3471 or elections@co.middlesex.nj.us

## 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
- 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 Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)





BUSINESS REPLY MAIL FIRST-CLASS MAIL PERMIT NO. 206 TRENTON NJ

POSTAGE WILL BE PAID BY ADDRESSEE

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

MIDDLESEX COUNTY COMMISSIONER OF REGISTRATION 777 JERSEY AVE NEW BRUNSWICK NJ 08901-9896

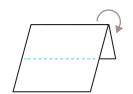
վիլիկիկիկովուինիրըիկիլունությունդերիու



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

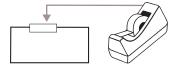


Put both pages together as shown



fold top down

2 fold bottom u



3 Tape top shut