

**VERMONT Application for Addition to the Checklist (VOTER REGISTRATION FORM)**

17 V.S.A. § 2145

(Please print clearly, use ballpoint pen, and bear down hard.)

I, \_\_\_\_\_ apply to have my name  
(Last Name) (First Name) (Middle Initial)

added to the checklist of the Town/City of \_\_\_\_\_.

**By checking the boxes below, I swear or affirm that these are true statements:**

- |                              |                             |   |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <b>Are you a citizen of the United States?</b>                                      |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <b>Will you be eighteen years of age or older on or before the day of election?</b> |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <b>Are you a resident of Vermont?</b>   |

**If you cannot check "Yes" in response to all three questions above, DO NOT complete this form.** You are not qualified to vote in Vermont. Contact the Office of the Secretary of State, Elections Division, for more information at (800) 439-8683.

I was born on \_\_\_\_\_ at \_\_\_\_\_,  
(Date) (Town or City) (State)

**My principal dwelling place is located at:** \_\_\_\_\_  
(E911 street address including number or exact physical location, if no E911 address)

**Mailing Address:** \_\_\_\_\_ **Tel. #:** \_\_\_\_\_

**Email:** \_\_\_\_\_ (optional - for contact purposes only).

By registering to vote in the above named town in Vermont, I authorize my name to be removed from the list of registered voters in any previous place where I was registered to vote.

**The last address I was registered to vote at:** \_\_\_\_\_  
(Physical location – include number, street, town, state and zip code)

I was previously registered with a **different last name of:** \_\_\_\_\_.

**My VT Driver's License or Personal I.D. # (PID#) issued by VT DMV is** \_\_\_\_\_ **This # is REQUIRED.**

**IF you do not have a VT Driver's License or PID# issued by VT DMV enter the last 4 digits of your Social Security Number:** \_\_\_\_\_. If you do not have a VT PID#, or SSN, please contact the Office of the Secretary of State, Elections Division, (800)439-8683.

**First time Registrants in VT must take the voter's oath. The oath may be self-administered. You must be 18 to take the oath:**  
**VOTER'S OATH** (Vermont Constitution, Chapter II, Section 42): "You solemnly swear or affirm that whenever you give your vote or suffrage, touching any matter that concerns the State of Vermont, you will do it so as in your conscience you shall judge will most conduce to the best good of the same, as established by the Constitution, without fear or favor of any person."

**By checking this box I swear or affirm that:**  **I have taken the Voter's Oath**

**I meet all of the eligibility requirements to vote in this municipality. I hereby swear, or affirm, under penalty of perjury and other potential federal or state criminal penalties of up to a \$10,000 fine, or imprisonment for not more than fifteen years, or both, that the statements made by me in this application are true. (17 V.S.A. § 2145(f); 17 V.S.A. § 2011; 42 U.S.C. § 1973gg-10).**

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Applicant's Signature

**ONLY if you are registering to vote for the 1<sup>st</sup> time in Vermont, AND you are mailing this application to your town clerk individually, you must submit a photocopy of one of the following: current & valid photo identification OR bank statement, utility bill, or government document with your name and current address. (Do not submit I.D. if you have been previously registered in VT, if this form is submitted as part of a voter registration drive, or if you return this form to the clerk's office in person.)**

**FOR OFFICIAL USE:**  The Town Clerk OR  the BCA has reviewed the application AND the applicant  was added to the checklist. The applicant's usual polling place is: \_\_\_\_\_. OR the applicant  was rejected and NOT added to the checklist. The reason(s) for rejection are: \_\_\_\_\_.

**Signature of town clerk:** \_\_\_\_\_

Date Entered on Checklist: \_\_\_\_\_ Date Notification Sent to Voter: \_\_\_\_\_ Date Approved: \_\_\_\_\_

**KEEP THE PINK COPY OF THIS APPLICATION FORM.** Contact your Town Clerk to make sure your application has been received. **Bring pink copy to the polls when you go to vote.** This is proof you have submitted an application before the deadline for registration.

[SOS-VR-11/21/2017]