



Knox County Election Commission

APPLICATION FOR ABSENTEE BY MAIL BALLOT

Full Name: _____

Social Security Number: _____

Address of Permanent Residence: _____

Date of Birth: _____

I am requesting an absentee ballot for **City of Knoxville Regular Election** to be held on **November 7, 2017**. My reason for requesting an absentee ballot is (check one):

- | | |
|---|---|
| <input type="checkbox"/> 60 years of age or older | <input type="checkbox"/> Hospitalization, sickness, or physical disability |
| <input type="checkbox"/> Jury duty | <input type="checkbox"/> Caretaker of a hospitalized, ill or physically disabled person |
| <input type="checkbox"/> Candidate for office | <input type="checkbox"/> A person with a disability whose polling place is inaccessible |
| <input type="checkbox"/> Election official | <input type="checkbox"/> Commercial driver working out of county. Driver license number here: _____ |
| <input type="checkbox"/> Religious holiday | |
| <input type="checkbox"/> Property Qualified | |

OR

If you mark one of the four reasons below, you **must** provide an out-of-county address.

- Out of the county on Election Day and during all the days of early voting
- Student attending school outside Knox County
- Spouse of student attending school outside Knox County
- Full-time resident of licensed nursing home, home for the aged or similar licensed institution providing relatively permanent domiciliary care, other than a penal institution, outside the voter's county of residence

Please provide your **out-of-county** address below:

Name: _____

Street: _____

City, State and Zip: _____

Signature: _____

Date: _____

This application **must** be received in the election commission office no later than October 31, 2017. You may return this form by mail to the address listed below, by fax to 865-215-4239, or by email to tammy.cole@knoxcounty.org