

Voter Registration Application

Before completing this form, review the General, Application, and State specific instructions.

Are you a citizen of the United States of America? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Will you be 18 years old on or before election day? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If you checked "No" in response to either of these questions, do not complete form. (Please see state-specific instructions for rules regarding eligibility to register prior to age 18.)		This space for office use only.										
1	<input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last Name	First Name	Middle Name(s)	<input type="checkbox"/> Jr <input type="checkbox"/> II <input type="checkbox"/> Sr <input type="checkbox"/> IV							
2	Home Address		Apt. or Lot #	City/Town	State	Zip Code						
3	Address Where You Get Your Mail If Different From Above			City/Town	State	Zip Code						
4	Date of Birth Month Day Year		5	Telephone Number (optional)		6						
7	Choice of Party (see item 7 in the instructions for your State)		8	Race or Ethnic Group (see item 8 in the instructions for your State)								
9 I have reviewed my state's instructions and I swear/affirm that: <input type="checkbox"/> I am a United States citizen <input type="checkbox"/> I meet the eligibility requirements of my state and subscribe to any oath required. <input type="checkbox"/> The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or (if not a U.S. citizen) deported from or refused entry to the United States.			Please sign full name (or put mark) ▲ Date: <table border="1" style="display: inline-table; width: 150px; height: 20px;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> <tr> <td>Month</td> <td>Day</td> <td>Year</td> </tr> </table>							Month	Day	Year
Month	Day	Year										

If you are registering to vote for the first time: please refer to the application instructions for information on submitting copies of valid identification documents with this form.

Please fill out the sections below if they apply to you.

If this application is for a **change of name**, what was your name before you changed it?

A	<input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last Name	First Name	Middle Name(s)	<input type="checkbox"/> Jr <input type="checkbox"/> II <input type="checkbox"/> Sr <input type="checkbox"/> IV
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If you were **registered before** but this is the first time you are registering from the address in Box 2, what was your address where you were registered before?

B	Street (or route and box number)	Apt. or Lot #	City/Town/County	State	Zip Code
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If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

C	<ul style="list-style-type: none"> Write in the names of the crossroads (or streets) nearest to where you live. Draw an X to show where you live. Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark. 	NORTH ↑			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Example</td> <td style="width: 10%; text-align: center;">Route #2</td> <td style="width: 70%;"> <div style="text-align: center;">● Grocery Store</div> <div style="text-align: center;">Woodchuck Road</div> <div style="text-align: center;">Public School ●</div> <div style="text-align: right;">X</div> </td> </tr> </table>	Example	Route #2	<div style="text-align: center;">● Grocery Store</div> <div style="text-align: center;">Woodchuck Road</div> <div style="text-align: center;">Public School ●</div> <div style="text-align: right;">X</div>	
Example	Route #2	<div style="text-align: center;">● Grocery Store</div> <div style="text-align: center;">Woodchuck Road</div> <div style="text-align: center;">Public School ●</div> <div style="text-align: right;">X</div>			

If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

D	
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Mail this application to the address provided for your State.

		Wisconsin Voter Registration Application						<input type="radio"/> Submitted by Mail (Official Use Only)			
		Confidential Elector ID# (HINDI - sequential #) (Office Use Only)			WisVote ID# (Official Use Only)						
Instructions	<div style="border: 1px solid black; padding: 5px;"> Instructions for completion are on the back of this form. Return this form to your municipal clerk, unless directed otherwise. Proof of Residence (see reverse) must accompany this application unless you are a military or permanent overseas voter. If this is a change of address, upon completion of this application your voting rights will be cancelled at your previous residence. Please print your information clearly and legibly. Fill in circles as applicable. </div>										
1	<input type="radio"/> New WI Voter <input type="radio"/> Name Change <input type="radio"/> Address Change		Municipality <input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City		VILLAGE OF ROTHSCHILD						
			County		MARATHON						
2	WI Driver License or WI DOT-Issued ID# (Req. if not expired or cancelled)				Expiration Date		I have neither a WI Driver License/ ID nor a Social Security Number. <input type="radio"/>				
Social Security Number - Last Four Digits (Req. if driver license or state ID is not issued, has expired, or has been cancelled)				XXX - XX -							
Current		Last Name		First Name							
		Middle Name		Suffix (e.g. Jr, II, etc.)		Phone #					
		Date of Birth (MM/YYYY)		Email Address							
		If you are a military or permanent overseas elector, fill in the appropriate circle (see instructions for definitions): <input type="radio"/> Military <input type="radio"/> Permanent Overseas									
		4		Residence Address: Street Number & Name							
Apt. Number				City		State & ZIP					
5		Mailing Address: Street Number & Name									
		Apt. Number		City		State & ZIP					
Previous		Last Name		First Name							
		Middle Name		Suffix (e.g. Jr, II, etc.)							
		Previous Address: Street Number & Name									
7		Apt. Number		City		State & ZIP					
8		Accommodation needed at poll location (e.g. wheelchair access):				If you do not have a street number or address, use the map to show where you live. •Mark crossroads •'X' where you live •Use dots for landmarks					
		<input type="radio"/> I am interested in being a poll worker.				<div style="border: 1px solid black; padding: 5px; font-size: 0.8em;"> Example: </div>					
9		Please answer the following questions by filling in "Yes" or "No": 1. Are you a citizen of the United States of America? <input checked="" type="radio"/> Yes <input type="radio"/> No 2. Will you be 18 years of age or older on or before the first election at which you will offer to vote? <input checked="" type="radio"/> Yes <input type="radio"/> No									
		If you filled in "No" in response to EITHER of these questions, do <u>not</u> complete this form.									
10		I hereby certify, to the best of my knowledge, that I am a qualified elector, a U.S. citizen, at least 18 years old or will be at least 18 years old at the time of the first election at which I will offer to vote, having resided at the above residential address for at least 10 consecutive days immediately preceding this election, with no present intent to move. I am not currently serving a sentence including incarceration, parole, probation, or extended supervision for a felony conviction, and not otherwise disqualified from voting. I certify that all statements on this form are true and correct. If I have provided false information I may be subject to fine or imprisonment under State and Federal laws. If completed on Election Day: I further certify that I have not voted in this election. Please sign below to acknowledge that you have read and understand the above.									
11		Elector Signature: X			Today's Date / /		Proof of Residence type (Official use only)		Proof of Residence Issuing Entity (Official use only)		
							Proof of Residence # (Official use only)		Election Day Voter # (Official use only)		
Falsification of information on this form is punishable under Wisconsin law as a Class I felony.											
12		Assistant Signature:			Assistant Address:						
Official's Signature:					Date complete & POR received:		SRDs printed name and SRD#:				
Ward		Sch. Dist.		Alder		City Supr.		Cl. of App.		Assembly	
										St. Senate	
										Congress	

Wisconsin Voter Registration Application Instructions

Each section on the front side of this document corresponds to the sections below (1-12)

These documents constitute proof of residence if they contain the voter's current and complete first and last name and residential address, and are valid on the day used to register to vote. Electronic versions are also acceptable.

- A WI Driver License / ID Card, if not expired or cancelled. May be used even if driving privileges have been revoked.
- Any other official identification card or license issued by a Wisconsin governmental body or unit
- An employee ID card with a photograph, but not a business card
- A real property tax bill or receipt for the current year or the year preceding the date of the election
- A residential lease (Does not count as proof of residence if elector submits form by mail)
- A picture ID from a university, college or technical college coupled with a fee receipt or an on-campus housing listing provided by the university, college or technical college
- A utility bill for the period commencing not earlier than 90 days before the day registration is made
- (Homeless voters only) A letter from an organization that provides services to the homeless that identifies the voter and describes the location designated as the person's residence for voting purposes
- A contract/intake document prepared by a residential care facility indicating that the occupant resides in the facility.
- A bank/credit card statement
- A paycheck
- A check or other document issued by a unit of government

1.

- Fill in the circle (New WI Voter, Name Change, Address Change) describing why you are completing this form.
- A "New WI Voter" is anyone who is not currently registered to vote in Wisconsin. You can check your voter registration status at MyVote Wisconsin website (<https://myvote.wi.gov>)
- Indicate your county and municipality of residence (e.g. Town of Eaton, Manitowoc County)

2.

- If you have been issued a WI driver license or WI DOT-issued ID that is unexpired, you must provide the number, even if your driving privileges have been revoked. If you are unsure of the number, please call DMV at (608) 266-2353.
- If you have been issued a WI driver license or WI DOT-issued ID that is currently expired or has been cancelled, please provide the number. You must also provide the last 4 digits of your Social Security number.
- If you have not been issued a WI driver license or WI DOT-issued ID, you must provide the last 4 digits of your Social Security number.
- If you have not been issued a WI driver license, a WI DOT-issued ID, or a Social Security number, indicate that fact by filling in the appropriate circle.
- If you are registering to vote on Election Day and have been issued a WI driver license or ID, but are unable or unwilling to provide the number, your vote will not be counted unless you provide the number to the election inspectors by 8:00 p.m. on Election Day or to your municipal clerk by 4:00 p.m. the Friday following Election Day.

3.

- Provide your current and complete name including your last name, first name, middle name, and suffix (Jr., Sr., etc.), if any. Please verify you have provided your name as it appears on the document, the number of which you provided in Box 2, if the name on that document is still your current and complete name.
- Provide your month, day, and year of birth.
- Providing your phone number and/or email address is optional and is subject to open records requests.
- A "military elector" is a person, or the spouse or dependent of a person who is a member of a uniformed service or merchant marine, a civilian officially attached to a uniformed service and serving outside the United States, or a Peace Corp volunteer. Military electors are not required to register as a prerequisite to voting at any election.
- A "permanent overseas elector" is a US citizen, at least 18 years old, who does not qualify as a resident of this state, but who was last domiciled in this state, or whose parent was last domiciled in this state immediately prior to the parent's departure from the United States, and who is not registered to vote in any other state.

4.

- Provide your home address (legal voting residence) in Wisconsin.
- Provide your full street name, including the type (St, Ave, etc.) and any pre- and/or post-directional (N, S, etc.).
- Provide the city name and ZIP code that appears on mail delivered to your home address.
- You may not enter a PO Box as a residential address. A rural route box without a number should not be used.

5.

- If your mailing address is different from your home address, provide it here. A PO Box is acceptable as a mailing address. Overseas electors should provide their complete overseas address here.

6.

- Provide your previous first, last, and middle names, along with a suffix, if any.

7.

- Provide the most recent address where you were previously registered to vote, if any.

8.

- If you need assistance when voting, you may describe the assistance required (e.g. curbside voting, braille materials).
- If you are interested in being a poll worker for your municipality, you may fill in the circle to indicate your interest.
- If you do not have a street address, use the map to show where you live.

9.

- If you answer "No" to either question in this section, you are not eligible to vote in Wisconsin.
- Please note, for question 2, you must either be at least 18 years old, or will be at least 18 years old at the time of the next election to be eligible to vote. If you are completing on Election Day you must be 18 years old today.

12.

- **Assistant:** If you are unable to sign this form due to a physical disability, you may have an assistant do so on your behalf. That assistant must provide his or her signature and address in the space provided. By signing, the assistant certifies that he or she signed the form at your request.

If you are not a U.S. citizen, you cannot register to vote.