

**Connecticut WIC Program Manual
Federal Fiscal Year 2016**

Section: Voter Registration

105-01 Compliance with the National Voter Registration Act of 1993

SECTION: Voter Registration**SUBJECT: Compliance with the National Voter Registration Act of 1993****ITEM: Authority: Public Law 103-31**

POLICY

To ensure local agencies are in compliance with the National Voter Registration Act (NVRA) of 1993 and the Federal WIC regulations.

The State WIC office will:

- Provide each local agency with a listing of the voter registrars for each county in their service area. This is located on the Connecticut Secretary of the State office website at <http://www.ct.gov/sots/LIB/sots/ElectionServices/lists/ROVOfficeAddresses.pdf>
- Provide training materials to local agencies in order to ensure uniform application of this policy and shall oversee and monitor local agencies for compliance with the provisions of this policy.

Adult applicants/participants (i.e. pregnant, breastfeeding, or postpartum women) shall be provided with the opportunity to register to vote at:

- The time of certification,
- Each subsequent certification, and
- Any time the applicant/participant reports a change of address.

Adult parents/caretakers applying on behalf of an infant/child shall be provided with the opportunity to register to vote at:

- The time of certification and
- Any time the parent/caretaker reports a change of address.

To be eligible to register to vote, the applicant/participant or parent/caretaker must be a citizen of the United States for one month, a resident in the election district for thirty days and at least 17 years old to register and 18 years old to vote¹. Local agency staff may determine a person's age solely by reviewing any available documents filed by the applicants. If an individual's age cannot be determined the agency shall offer the individual the opportunity to register to vote. Except for those applicants/participants or parents/caretakers who are not of voter registration age the local agency staff shall not make a determination about their eligibility to register to vote.

Local agency staff shall:

- Provide adult applicants/participants and adult parents/caregivers applying on behalf of an infant/child with the State of Connecticut Mail-In Voter Registration application and the Opportunity to Register to Vote/Declination form.

¹ An adult is defined as an individual at least 17 years and 10 months of age

- Offer any assistance necessary in understanding or completing the form, including assistance in the appropriate language.
- Forward in person or via mail voter registration applications to the county voter registrar located in the same county as the WIC clinic within five days of receipt (Mailing costs associated with transmission of forms are allowable costs).
- Document those who decline to register to vote and shall provide assistance to the applicant/participant or parent/caretaker in understanding the declination process, if requested, including assistance in the appropriate language.
- Inform the applicant/participant or parent/caretaker that the decision to whether or not register to vote shall have NO effect on the application for WIC benefits and can determine at what point in the WIC application/certification/recertification process to offer voter registration services. To avoid any barrier effect, it may be advisable to provide such services after completion of the WIC application process.

Completion of forms

Clients who are not able to write may make a “mark” for their signature. Local agency staff shall then print the client’s name and sign their own name as witness².

Street addresses are required. Rural routes or post office boxed are not acceptable as a “Residence address”.

Local agency staff is prohibited from influencing an applicant’s/participant’s or parent’s/caretaker’s political preference or party registration, displaying any political preference or party affiliation, or making any statement or taking any action where the purpose or effect is to discourage the individual from registering to vote, or making any statement or taking any action whose purpose or effect is to lead the individual to believe that a decision whether or not to register has any bearing on the availability of WIC services or benefits.

If an applicant/participant or parent/caretaker does NOT wish to register to vote at the initial WIC certification appointment, local agency staff shall:

- Have the applicant/participant complete and sign the declination statement on the Opportunity to Register to Vote/Declination form
- Maintain the form in the participant’s file; completed declination statements/forms shall be retained for 22 months and be available for audit/review.
- Have the applicant/participant initial in the space provided on the certification form.

If the applicant/participant or parent/caretaker chooses NOT to sign the Opportunity to Register to Vote/Declination form, the local agency staff shall initial the appropriate box designated “For Office Use Only”.

If the applicant/participant or parent/caretaker chooses NOT to sign the Opportunity to Register to Vote/Declination form, BUT chooses to take a Voter Registration application home, staff shall initial the appropriate box that the participant took the form to complete and mail.

² A witnessing signature by WIC staff serves only as a declaration that the staff person witnessed the applicant make a signature mark and does not constitute a declaration that any or all of the information provided by the applicant is correct and true.

In all cases where a applicant/participant has a complaint, they shall be provided with the Secretary of State's Election Department's toll-free number, 1-800-540-3764, and the number of the local county voter registrar.

At re-certifications or address changes, certification form instructions allow for the participant to initial on the back of the certification form rather than completing the Declination Form again.



STATE OF CONNECTICUT MAIL-IN VOTER REGISTRATION

(Disponible en Español)
ED-671 S
REV. 9/05
(CGS §9-23g)

■ YOU MAY USE THIS EASY FORM TO:

- register to vote in Connecticut
- change your name and/or address on current registration
- enroll in a political party or change party enrollment (Changing parties may result in losing rights in all parties for 3 months)

IMPORTANT! Keep your voter record up to date

■ TO REGISTER TO VOTE IN CONNECTICUT

YOU MUST:

- be a United States citizen;
- be a resident of a Connecticut town;
- be at least 17 years old (**must turn 18 before primary/election day**); see section 1b below
- have completed confinement and parole if previously convicted of a felony and have had your voting rights restored by Registrar.

■ IF YOU MOVE:

You must fill out a new voter registration card if you have moved to a new town. Also, use this form to change address within town. (See section 1a and section 10 below)

■ QUESTIONS?

Call your local Registrar of Voters or the Secretary of the State at **(800) 540-3764** or **(860) 509-6100** (TDD, 800-303-3161)

■ REGISTRATION INSTRUCTIONS:

1. Fill in *all* boxes that apply to you on this application.
2. Place a first-class stamp on the application card, fold, and mail it to the town hall where you live (or deliver it to your town hall or voter registration agency).
3. **You are not a voter until your application is approved by the Registrar of Voters.**
4. You should receive a confirmation within 3 weeks. If you do not, contact the Registrar in your town hall.
5. **If (1) you submit this form by mail and (2) you are registering for the first time in town, you may wish to submit with this application your driver's license number or if none, the last four digits of your social security number; or (a) a copy of a current and valid photo I.D. or (b) a copy of a current utility bill, bank statement, government check, paycheck, or government document that shows your name and address, in order to avoid additional I.D. requirements the first time you vote.**

■ REGISTRATION DEADLINES FOR NEW VOTERS:

PRIMARY: Your application must be postmarked by the **5th day before a primary** (OR received by your Registrar of Voters or a voter registration agency by the **5th day before a primary**). You may apply in person to your town clerk or registrar until 12:00 noon on the last business day before a primary.

ELECTION: Your application must be postmarked or received by a voter registration agency by the **14th day before an election** (OR you may register in person with your Registrar of Voters by the **7th day before an election**).

FOLD ----- PLEASE USE PEN - PRINT CLEARLY ----- FOLD

| | | | | | |
|---|--|---|--|---|---|
| 1a Check Boxes that Apply: | | <input type="checkbox"/> New Voter Registration <small>(Includes move to a new town)</small> | <input type="checkbox"/> Address Change <small>(within the same town)</small> | <input type="checkbox"/> Name Change | <input type="checkbox"/> Party Enrollment Change |
| 1b Are you a U.S. citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO | | Will you be 18 on or before election day? <input type="checkbox"/> YES <input type="checkbox"/> NO | | If you checked "NO" to either of these questions, do not complete this form. | |
| 2 Name of Applicant | | Last Name | | First Name | |
| Mr. Mrs. Miss Ms. | | | | Middle Name or Initial Jr. Sr. II III IV | |
| 3 Date of Birth <small>(Month Day Year)</small> | | 4 CT Driver's License Number <small>(If none, last 4 digits of Soc. Sec. No.)</small> | | 5 Address Where You Live | |
| / / | | | | No., Street, Apt. # Town _____ Zip _____ State Connecticut | |
| 6 If Different, Address Where You Get Your Mail (P.O. Box, etc.) | | | 7 Telephone Number (optional) () | | 8 Gender <input type="checkbox"/> Male <input type="checkbox"/> Female |
| 9 Do you wish to enroll in a political party? <input type="checkbox"/> YES. Name of party: __Republican __Democratic Other: _____ <input type="checkbox"/> NO. I do not wish to enroll in a party at this time. <small>Note: Declaring a party enables you to vote in that party's primary election, which is open only to party members. You may later choose to switch enrollment to or from a political party.</small> | | | 10 NAME or ADDRESS CHANGE. Previous Voting Address (If none, write "NONE") No, Street, Apt # _____ Town _____ County _____ State _____ Name Under Which Registered (if different from above) | | |
| 11 I swear or affirm that: • I am a U.S. Citizen • I live at the address shown in box 5 above • I am at least 17 years old • I have not been convicted of a disfranchising felony, or if so, my voting rights have been restored • The information provided here is true Signature _____ Today's Date: ____/____/____ | | | | | 12 Would you like to work at the Polls on Election Day? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| NOTE: The particular office at which you register to vote, or whether you decline to register, remain confidential and will be used only for voter registration purposes. | | | S | | |
| | | | WARNING: If you sign this statement even though you know it is untrue, you can be convicted and imprisoned for up to five years and fined up to \$5,000. | | |

| | | | | | |
|---|-------------------|---|-----------------------------------|--|--|
| THIS SECTION COMPLETED ONLY BY AGENCY (OR SPECIAL ASSISTANT REGISTRAR OR TOWN CLERK) <small>(Date Received by Agency)</small> | | THIS SECTION COMPLETED ONLY BY REGISTRAR OF VOTERS | | | |
| DATE RECEIVED BY REGISTRAR | REGISTRAR INITIAL | APPLICATION IS HERE BY: | | DATE NOTICE MAILED | |
| | | <input type="checkbox"/> ACCEPTED | <input type="checkbox"/> REJECTED | <input type="checkbox"/> NOTICE RETURNED UNDELIVERABLE | |
| DATE ENROLLMENT EFFECTIVE IF CHANGING PARTY | | | REASON FOR REJECTION | | |

PLEASE TAPE - DO NOT STAPLE

From: _____

Place
Stamp
Here

REGISTRAR OF VOTERS

_____ TOWN HALL
Name of Town

Address

_____, CT _____
Town Zip

OPPORTUNITY TO REGISTER TO VOTE-DECLINATION FORM

Applying to register to vote or declining to register will not affect the amount of assistance that you will be provided by this agency, nor will it affect your eligibility for services.

If you are not registered to vote where you live now, would you like to apply to register to vote here today?

YES **NO**

I'm already registered to vote at my current address

If you do not check either box, you will be considered to have decided not to register to vote at this time and you will be asked to sign below.

If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private and mail it yourself.

If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with:

State Elections Enforcement Commission
18-20 Trinity Street
Hartford, CT 06106
Tel: (860) 256-2940

If you decline to register to vote, information regarding the office to which the application was submitted will remain confidential, and again will only be used for voter registration purposes.

DECLINATION OF VOTER REGISTRATION

I decline to register to vote today.

Signature of Applicant

____/____/____
Date

Printed Name of Applicant

FOR OFFICE USE ONLY

Applicant Refused to Sign _____
Applicant Unable to Sign _____
Applicant Took Form to Mail _____

OPORTUNIDAD DE INSCRIBIRSE PARA VOTAR-ABSTENCION DE INSCRIPCIÓN PARA VOTAR

Si no se ha inscrito para votar en el lugar donde reside ahora, ¿le gustaría aplicar para inscribirse para votar hoy?

SI **NO**

Estoy inscrito/a para votar en mi lugar de residencia actual

El aplicar o rechazar la inscripción de votante no afecta la cantidad de asistencia que este departamento le ofrece.

SI NO MARCA NINGUNA DE LAS CASILLAS, CONSIDERAREMOS QUE USTED DECIDIO NO INSCRIBIRSE PARA VOTAR EN ESTE MOMENTO Y SE LE PEDIRA QUE FIRME ABAJO.

Si lo desea, le ayudaremos a llenar la solicitud de inscripción de votantes. La decisión de pedir ayuda o de aceptarla es suya. Puede llenar la solicitud en privado y enviarla usted mismo/a.

Si cree que alguien ha interferido con su derecho de inscribirse o de no inscribirse, o con su derecho a la confidencialidad en lo que se refiere a su decisión de inscribirse o de solicitar la inscripción para votar, o en su derecho a elegir su candidato político u otra preferencia política, puede presentar una queja a:

State Elections Enforcement Commission
18-20 Trinity Street
Hartford, CT 06106
Tel: (860) 256-2940

La decisión de no inscribirse para votar se mantendrá confidencial y sólo se utilizará con propósitos de inscripción de votantes.

Si decide inscribirse para votar, la información relativa a la oficina en la que presente la solicitud se mantendrá confidencial y solamente se utilizará con propósitos de inscripción de votantes.

ABSTENCION DE INSCRIPCION PARA VOTAR

No deseo inscribirme para votar hoy.

Firma del Solicitante

____/____/____
Fecha

Nombre del Solicitante en Letra de Molde

FOR OFFICE USE ONLY:

Applicant Refused to Sign _____

Applicant Unable to Sign _____

Applicant Took Form to Mail _____