



Voter Registration

For UMW Students



What is on the ballot on November 3rd?

- **President of the United States**
- **U.S. Senator**
- **U.S. House of Representatives**
- **Two Amendments to the Virginia Constitution (language not finalized yet)**
 - One will determine if Virginians want to create a bipartisan commission to take over redistricting.
 - One will be about taxation.

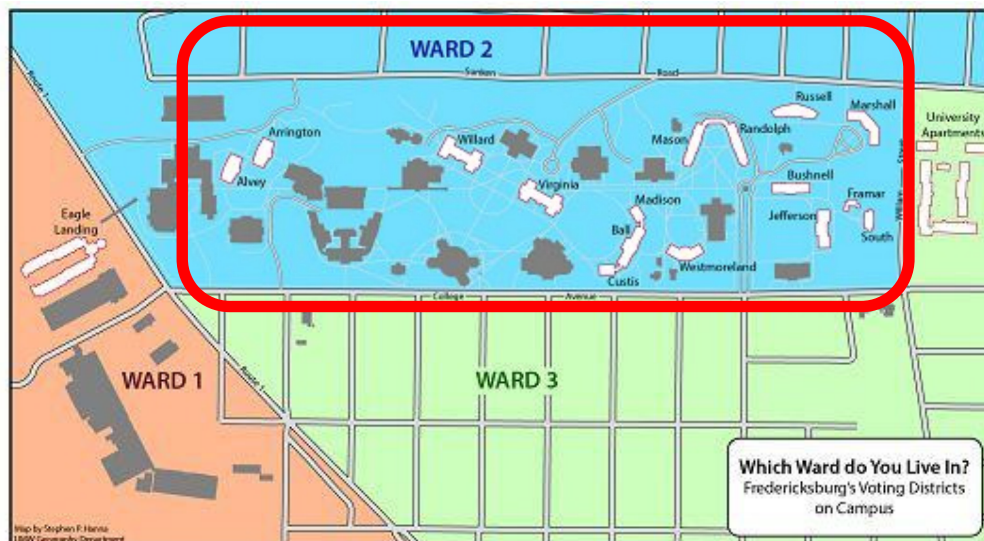


Registering to Vote: Dorms

- This presentation covers registering at your Fredericksburg address (Dorms and Residence Halls).
- The deadline to register to vote in the November 3rd election **is October 13th, 2020.**



Where do you live?



It's complicated...

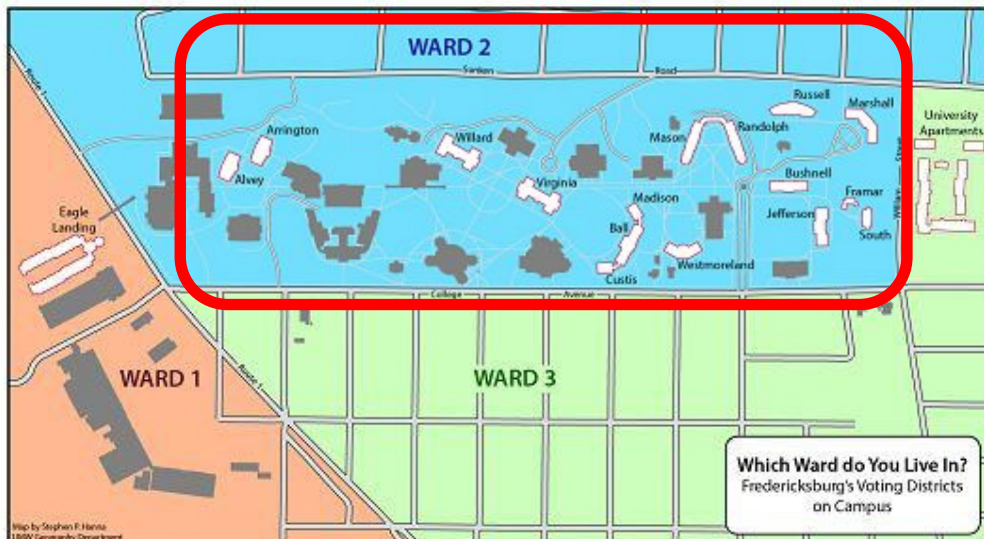
Residence Address

VS.

Mailing Address



You need to know your *residence address* and your *mailing address*



Virginia Voter Registration Application

DORMS ON CAMPUS

Starred (*) items are required. If you do not complete all of the items that are marked with *, your application may be denied. (See instructions on reverse side).

1. YES NO
* I am a citizen of the United States of America. * Full social security number 1,2,3,4,5,6,7,8,9 * Date of birth 01/01/2000 * Gender F

2. * Last name DOE Jr. Sr. II III IV (Circle if applicable)
* First name JANE * Middle name JANET None
* Residence address (May not be a P.O. Box) 1301 COLLEGE AVE. Apt #
* City/Town FREDERICKSBURG * ZIP 22401
E-mail jjdoe@mail.umw.edu Phone 703-123-4567

3. * Have you ever been convicted of a felony or judged mentally incapacitated and disqualified to vote? YES NO If YES, has your right to vote been restored? YES NO

4. I am an active-duty uniformed services member, spouse or dependent; or an overseas citizen.
 I am providing a mailing address (below) because my residence address is not serviced by the U.S. Postal Service or I am homeless.
 I am providing a Virginia P.O. Box (below) to protect my residence address from public disclosure because:
 I am an active or retired law enforcement officer, judge, U.S. or Virginia Attorney General attorney
 I have a court issued protective order for my benefit
 I have evidence of filing a complaint with law enforcement that either I or a household member is in fear for personal safety from another person who has threatened or stalked either me or a household member
 I am a participant in the Virginia Attorney General's Address Confidentiality Program

My mailing address (Complete only if you have checked a box in this section)
1701 COLLEGE AVE Umw Box 1234
FREDERICKSBURG, VA 22401

This is your Residence Address



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My mailing address (Complete only if you have checked a box in this section)
1701 COLLEGE AVE Umw Box 1234
FREDERICKSBURG, VA 22401

This is your Mailing Address



Virginia Voter Registration Application

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* I am a citizen of the United States of America. * Full social security number 1 2 3 4 5 6 7 8 9 * Date of birth 0 1 / 0 1 / 2 0 0 0 * Gender F

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1701 COLLEGE AVE UMW Box 1234
FREDERICKSBURG, VA 22401

Make sure you put your UMW Box

