

■ APPLICATION TO VOTE BY PROXY DUE TO EMPLOYMENT ■

Only ONE person per form please. If more forms are required or if you need help filling in this form, please telephone (0131) 344 2500.

Please write in BLACK INK and use BLOCK LETTERS

1. ADDRESS WHERE YOU ARE REGISTERED TO VOTE

.....
.....
.....

2. ABOUT YOU

First name(s) (in full)

.....

Surname

.....

Daytime or mobile telephone and e-mail
(in case of query only)

.....

.....

3. FOR HOW LONG DO YOU WANT TO VOTE BY PROXY?

(a) Until further notice

(b) For election(s) on the following date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year		

(c) For elections between the following dates

From	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Day	Month	Year	

Until	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Day	Month	Year	

4. PROXY VOTE FOR WHICH ELECTIONS?

All elections you are entitled to vote at

Local elections

Parliamentary elections

5. NAME AND ADDRESS OF APPOINTED PROXY

First name(s) (in full)

.....

Surname

.....

Address

.....

.....

Relationship to you (if any)

.....

You may if you wish, ask your proxy to sign.

I can confirm that I am capable of being and willing to be appointed to vote as the applicant's proxy.

Proxy Signature

.....

6. REASON FOR APPLICATION

Please fill in Section A if you have an employer or B if you are self-employed.

A ~ Employed

I am/my husband, wife or civil partner is employed by (give employer's name and address):

.....

.....

.....

As (give job title):

.....

B ~ Self-employed

I am/my husband, wife or civil partner is self-employed as (give job title):

.....

I am not able to go to the polling station on election day because:

.....

.....

.....

Cont'd Over/...■

7. DECLARATION IN SUPPORT

Read the notes to see who can support your application. Please ask the person who supports your application to give their name, address and position.

Supporter's Full Name

.....

Supporter's Address

.....

.....

Supporter's Position

.....

To the best of my knowledge and belief, the applicant's statement above is true.

Supporter's Signature

.....

Date

.....

8. YOUR SIGNATURE/RETURN OF FORM

I have asked the person I have named as my proxy and confirm that he/she is willing and able to be appointed to vote on my behalf.

As far as I know, the details on this form are true and accurate.

You can be fined for making a false statement on this form.

Your Date of Birth

Using the format DD MM YYYY enter your date of birth in the boxes opposite eg if your birthday is 2nd July 1977 enter **02 07 1977**.

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D D M M Y Y Y Y

Please SIGN in the box below using BLACK ink

Your Signature

Please SIGN in the box opposite using your usual signature – it must be within the white area and not touch the shaded outline.

Important – keep signature within the box.
If you fail to do this, this application may not be valid.

Dated / /
.....

HELPFUL INFORMATION

This form is for registered electors who cannot reasonably be expected to vote in person at their polling station due to employment reasons. This form is a legal document and your vote may depend on it.

PART 1 – ADDRESS WHERE YOU ARE REGISTERED TO VOTE

Please give the address where you are registered. If you wish to check if you are registered please contact the helpline given on the form.

PART 2 – ABOUT YOU

Please enter your name and contact details. Contact details are optional but are helpful if we need to contact you regarding your application. They will not be used or supplied for any other purpose.

PART 3 – HOW LONG DO YOU WANT A PROXY VOTE?

Your proxy vote can be for an indefinite period, a particular election or a particular period. Please indicate your choice here.

PART 4 – PROXY VOTE FOR WHICH ELECTIONS?

For all elections tick the first box.

PART 5 – NAME AND ADDRESS OF APPOINTED PROXY

If you decide to vote by proxy you must find someone suitable to agree to act for you before giving his or her name. You may if you wish get your proxy to sign the special statement on this form.

Not everyone is allowed to vote as proxy. Your proxy must:

- Be eligible to vote in the type of election concerned (he/she need not be currently registered as an elector).
- Not have agreed to act as proxy for more than two electors including you. He/she is however allowed to act as proxy for any number of his or her relatives (spouse or civil partner, parent, grandparent, brother, sister, child or grandchild).
- **Note that if granted a vote by proxy, you may vote in person but only if your proxy has not already voted on your behalf or has not applied for a postal vote to vote on your behalf.**

PART 6 – REASON FOR APPLICATION

Please fill in Section **A** if you have an employer or Section **B** if you are self-employed and state the reason you are unable to attend the polling station.

PART 7 – DECLARATION IN SUPPORT

If you cannot vote in person because of your employment you must ensure that the Declaration in Support is completed. In the case of employment this must be the employer or person acting on his behalf. If you are self-employed you must get another person to complete the declaration. This person **MUST NOT** be your spouse or civil partner, parent, grandparent, brother, sister, child or grandchild. The person must be aged 18 or over.

PART 8 – YOUR SIGNATURE/RETURN OF FORM

Please give your date of birth where requested and sign the form in the box.

Applications for a proxy vote must be received no later than **5.00pm** on the **SIXTH working day before the date of an election.**

If you need further help, please contact us on the telephone number noted below.

Electoral Registration Officer, 17A South Gyle Crescent, Edinburgh EH12 9FL

HELPLINE ~ 0131 344 2500

Fax : 0131 344 2600

E-Mail : enquiries@lothian-vjb.gov.uk

Visit our Website : www.lothian-vjb.gov.uk