

# COMMONWEALTH OF VIRGINIA



★ VIRGINIA ★  
DEPARTMENT *of* ELECTIONS

## NATIONAL VOTER REGISTRATION ACT TRAINING & REFERENCE MANUAL

PREPARED BY:  
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NVRA COORDINATOR

## **CHAPTER 1 - INTRODUCTION**

### **THE PURPOSE OF THE ACT**

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The purpose of the National Voter Registration Act is to increase the number of citizens registered to vote and to establish safeguards that ensure a citizens' right to vote. The Act is designed to increase the number of Americans registered to vote by requiring many public agencies to provide registration opportunities to their clients in conjunction with other services.

### **DEFINITION OF VOTER REGISTRATION SITES**

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In addition to the Department of Motor Vehicles, the National Voter Registration Act of 1993 requires that individuals be given the opportunity to register to vote (or to change their voter registration data) in elections for federal and/or state office when applying for (or receiving) services or assistance from certain other state agencies designated by statute.

### **WHEN TO PROVIDE CLIENTS AN OPPORTUNITY TO REGISTER**

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Individuals must be provided this opportunity not only at the time of their original application for services, but also when filing any recertification, re-admission, renewal, or change of name or address form relating to such services [42 D.S.C. § 7(a)(6)(A)].

You must provide the clients at your agency with the same level of assistance, including bilingual services where necessary, in completing a voter registration and/or certification form as you provide in completing your own forms, unless the applicant refuses such assistance [42 D.S.C. §§ 7(a)(4)(A)(ii) and 7(a)(6)(C)].

### **INFLUENCING PREFERENCE OF AN INDIVIDUAL**

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The person who provides such services as stated previously in the agency is prohibited from:

- ⇒ seeking to influence an applicant's party preference,
- ⇒ displaying any such political or candidate preference or party allegiance,
- ⇒ making any statement or taking any action whose purpose or effect is to discourage the applicant from registering to vote, or
- ⇒ making any statement or taking any action whose purpose or effect is to lead the applicant to believe that a decision whether or not to register has any bearing on the availability of services or benefits [42 D.S.C. § 7(a)(5)].

### **DOCUMENTS TO REGISTER OR DECLINE**

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Those who accept or decline to register to vote must do so by completing the *Commonwealth of*

*Virginia Voter Registration Agency Certification* form. The certification form and its instructions are provided in Chapter 3 of this document. This form is to be kept in the client's file, or other designated place, so other agency personnel will know that an individual has been offered the opportunity to register. **Note: Do not mail certification forms to the Department of Elections.**

If a client requests to register to vote, a *Virginia Voter Registration Application* form must be completed. An example of the *Virginia Voter Registration Application* form and instructions on completing the form are provided in Chapter 4 of this document. These forms are then forwarded to the Department of Elections for processing.

## **VOTER CONFIDENTIALITY**

No information regarding a person's declination to register may be used for any purpose other than voter registration [42 U.S.C. § 7(a)(7)].

Similarly, if an individual does register to vote, the particular agency at which the applicant submits a voter registration application may not be publicly disclosed [42 U.S.C. §§ 8(a)(6) and 8(1)(1)].

The application cannot be copied or used for any purpose other than voter registration in the Commonwealth of Virginia.

## **DESIGNATED AGENCY VOTER REGISTRATION SITES**

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In the Commonwealth of Virginia, the following agencies have been designated as voter registration sites:

- Department for the Deaf and Hard of Hearing
- Virginia Office Protection and Advocacy
- Department for the Blind & Vision Impaired
- Department of Game and Inland Fisheries
- Department of Health
- Department of Behavioral Health and Developmental Services
- Department of Motor Vehicles
- Department of Aging & Rehabilitative Services
- Department of Social Services
- Virginia Employment Commission in Northern Virginia Planning District 8
- Colleges & Universities (Disabilities Support Services)
- Va. Centers for Independent Living

## **IMPLEMENTATION OF VOTER REGISTRATION**

The National Voter Registration Act of 1993 was implemented at these agencies on March 6, 1996. The Department of Elections distributes all required manuals, forms, and envelopes to the various agencies.

## **CHAPTER 2 – GENERAL INFORMATION**

### **WHO MAY REGISTER?**

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To be eligible to vote in Virginia, a person:

- Must be a citizen of the United States
- Must live in the Commonwealth of Virginia  
*A person who has come to Virginia for temporary purposes and intends to return to another state is not considered a resident for voting purposes*
- Must be at least 18 years old by the date of the next general election
- Must not claim the right to vote elsewhere
- Must not have been convicted of a felony, or judged by a court to be incapacitated (unless civil rights to vote had been restored by the Governor or a court order has restored you to capacity)

### **WHAT IS THE DEADLINE TO REGISTER?**

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The voter registration application form must be received by either the local voter registration office or the Department of Elections no later than 22 days before the general, primary, and 14 days before a special election in which a person wants to vote.

### **HOW OFTEN SHOULD ONE REGISTER?**

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Anytime your name and/or address changes, a person should submit a new registration application. If a person is unsure that he/she is registered, the individual should fill out a new application form.

### **HOW TO COMPLETE THE APPLICATION FORM?**

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Refer to Chapter 4 of this document for specific instructions.

## **HOW WILL A PERSON KNOW IF THE REGISTRATION WAS ACCEPTED?**

Once the local registrar has determined (through the information provided on the application) that an individual is eligible to vote, a voter registration card will be mailed to the individual at the address on the application.

## **WHERE TO DIRECT QUESTIONS?**

*Contact the Department of Elections NVRA/ Voter Registration Coordinator for:*

Election Dates

Supply of applications and envelopes

Questions concerning applications

Any questions concerning NVRA's rules and regulations

Phone: (804) 864-8910

*Contact your Agency for:*

Internal procedures

Where to file certification forms

Procedures for transmittal of application forms

## **CHAPTER 3 – CERTIFICATION**

The following form is used by the agencies as part of the agency voter registration process that certifies the agency has provided an individual the opportunity to register to vote. An individual may decline to register by not checking the boxes on the form or failing to sign the form.

### **CERTIFICATION FORM**

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The following is an example of the certification form:

**SEE EXAMPLE ON NEXT PAGE**



## Commonwealth of Virginia Voter Registration Agency Certification

If you are not registered to vote where you live now, would you like to apply to register to vote here today?  
(Please check only one)

- I am already registered to vote at my current address, or I am not eligible to register to vote and do not need an application to register to vote.
- Yes, I would like to apply to register to vote. (please fill out the voter registration application form)
- No, I do not want to register to vote.

If you do not check any box, you will be considered to have decided **not to** register to vote at this time. Applying to register to vote or declining to register to vote will not affect the assistance or services that you will be provided by this agency.

If you decline to register to vote, this fact will remain confidential. If you do register to vote, the office where your application was submitted will be kept confidential, and it will be used only for voter registration purposes.

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 if you desire.

**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, you may file a complaint with:**

**Commissioner, Virginia Department of Elections  
Washington Building  
1100 Bank Street  
Richmond, VA 23219-3497  
(804) 864-8901**

Applicant Name	Signature	Date
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*for agency use only*

Voter Registration form completed:     Yes     No  
 Voter Registration form given to applicant for later mailing (at applicant's request):  Yes     No

Agency Staff Signature	Date
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## **COMPLETION OF THE FORM BY APPLICANT**

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1. All new applicants or anyone recertifying, renewing or changing their name or address for your services must be offered an opportunity to register to vote or change the information on their voting file.
2. You must inform all applicants that they should read and understand the statements found on the certification form as follows:

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

**If you do not check any box, you will be considered to have decided not to register to vote at this time. Applying to register to vote or declining to register to vote will not affect the assistance or services that you will be provided by this agency.**

**If you decline to register to vote, this fact will remain confidential. If you do register to vote, the office where your application was submitted will remain confidential, and may be used only for voter registration purposes.**

**If you would like help in 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, if you desire.**

**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, you may file a complaint with:**

**Secretary of the Virginia Department of Elections  
Washington Building  
1100 Bank Street  
Richmond, VA 23219-3497  
Telephone: (804) 864-8901**

3. Once the applicant has checked one of the three boxes at the top of the form, review the following:

- ✓Has the applicant printed his/her name in the *Applicant Name* space?
- ✓Has the applicant signed the form in the *Signature* space?
- ✓Has the applicant dated the form with today's date in the *Date* space?

4. If any information is missing or not legible, return the form to the applicant for completion or clarification.



If a person does not fill out the form or refuses to sign the form, print the individual's name on the form and place your initials beside the name. **This will be considered a declination to register to vote.**

### **COMPLETION OF THE FORM BY AGENCY**

After the certification form has been filled in correctly, you may accept it and complete the agency portion of the form.

#### **FIRST OR THIRD BLOCK CHECKED:**

1. Mark the 'No' box next to the "Voter Registration Form Completed" statement.
2. Sign your name and date the form at the bottom of the page.
3. Place the form in a specified location to be filed at your agency at a later date.  
**Do not mail certifications to the Department of Elections**

#### **SECOND BLOCK CHECKED:**

1. If the individual wants to register to vote, give the individual a copy of the *Virginia Voter Registration Application* form, providing whatever assistance the individual indicates is needed to complete it. Once completed, mark the 'Yes' box next to the "Voter registration form completed" statement.
2. If the individual requests to take the form to be filled out later, mark the box next to the "Voter registration form given to applicant for later mailing" statement.
3. Sign your name and date the form at the bottom of the page.

4. **Place the certification form in a specified location to be filed at your agency at a later date.**
5. Place the completed voter registration application form in a specified location to be mailed to the Department of Elections.

### **FILING THE CERTIFICATION FORM**

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The certification form should be kept in the client's file or designated place, so other agency personnel will know that the individual has been offered an opportunity to register. This form should be retained until superseded or until the client becomes inactive with your agency.

If additional blank forms are needed, you may photocopy these forms.

## **CHAPTER 4 - REGISTRATION**

### **HANDING OUT VOTER REGISTRATION APPLICATION FORMS**

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The applicant can either fill out the form at the agency or take the form home and mail it or hand carry it to any local registration office, the Department of Elections or other voter registration site. The application form must be received by either the local voter registration office or the Department of Elections no later than 22 days before the general, primary, or 14 days before a special election in order for the applicant to be eligible to vote in that election.

### **VOTER REGISTRATION APPLICATION FORM**

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The following is an example of the front of the application form:

**SEE EXAMPLE ON NEXT PAGE**

# Virginia Voter Registration Application Form

Use this form to register to vote in Virginia or report a change in name or address. If you are already registered with your current name and address, you do not need to re-register.

To register to vote in Virginia, you must:	- Be a United States citizen	- Have had your voting rights restored if you have ever been convicted of a felony
	- Be a resident of Virginia	- Have had your capacity restored if you have ever been declared mentally incapacitated in a Circuit Court
	- Be 18 years old by the next general election	

### Identification Requirement

For Registration: If you are registering for the first time by mail, federal law (the Help America Vote Act) requires you to provide identification the first time you vote in a federal election. Please enclose a copy of one of the following documents that shows your name and address with your application: (1) current and valid photo ID, (2) current utility bill, (3) bank statement, (4) government check, (5) paycheck, or (6) other government document. If eligible to vote absentee by mail, your mailed absentee ballot will not be counted unless the required identification has been provided to your local electoral board no later than noon on the Friday following the election.

For Voting: Virginia law requires you also to provide photo identification when you vote in person. An information card or other correspondence confirming your registration does not qualify as photo identification. For information on types of qualified photo identification, or how to obtain a Voter Photo Identification card, please visit <http://elections.virginia.gov/links/voterid/> or call toll free 1-800-552-0745 (TTY: 1-800-280-3488).

Starred (\*) items are required. If you do not complete all of the items that are marked with \*, your application may be denied. Once your local registrar approves your application, you will receive confirmation by mail.

1	*Are you a citizen of the United States of America? <input type="checkbox"/> YES <input type="checkbox"/> NO		* Will you be at least 18 years of age on or before the next General Election day? <input type="checkbox"/> YES <input type="checkbox"/> NO		If you checked "NO" in response to either of these questions, do not complete this form.	
2	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> *Social Security Number	<input type="checkbox"/> Male <input type="checkbox"/> Female *Gender	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> *Date of Birth	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Daytime Telephone Number		
<input type="checkbox"/> None <input type="checkbox"/> None						
*Last Name		*First Name		*Full Middle or Maiden Name		*Suffix (Jr., Sr., III, Etc.)
3	*Residence (Permanent) Home Address			Apt/Unit/Lot/Rm/Ste	City/Town	Zip Code
If Rural Address or Homeless, please describe where you reside				E-mail address		
Mailing Address (if different/Virginia PO Box or Uniformed Service Address, if applicable (include Zip Code)				<input type="checkbox"/> City or <input type="checkbox"/> County Name of City or County of Residence		
4	*Have you ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO State where convicted _____					
If YES, have your voting rights been restored? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, when restored? <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>						
5	*Have you ever been judged mentally incapacitated? <input type="checkbox"/> YES <input type="checkbox"/> NO					
If YES, has court restored you to capacity? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, when restored? <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>						
6	Registration Statement: I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided on this form is true. I authorize the cancellation (entered in Box 7 below) of my current registration and I have read the Privacy Act Notice on the front of this form.					
* Signature (or mark if unable to sign) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>						
If applicant is unable to sign due to a physical disability, write the name/address of person who assisted. (Required)						
<input type="text"/> <input type="text"/> <input type="text"/> Protected Voter Code if applicable. See instructions.						
<input type="checkbox"/> I'm interested in being an Election Official on Election Day. Please send me information.						
7	*Previous Voter Registration Information—Commonwealth of Virginia					
<input type="checkbox"/> No, I am not currently registered to vote in Virginia or another state.						
<input type="checkbox"/> Yes, I am registered to vote at another address in Virginia or in another state. If YES, the information below must be completed:						
Full Name as Registered		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Date of Birth	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Social Security Number (last 4 digits required)			
Address at which you were previously registered to vote		City/Town	State	Zip Code		
City/County/Town of Residence (if applicable). This cancellation information will be sent to the county or city and state you entered above.						

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The following is an example of the back of the application form:

## Virginia Voter Registration Application Receipt

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Name of group or individual receiving application

No receipt is required for application completed in the Voter Registration Office.

/   /      
 Date

-    -      
 Daytime telephone number of group or individual receiving application

If you have not received a Voter Card within thirty (30) days of submitting a Voter Registration Application, please **contact the Virginia State Board of Elections.**

On-line: [www.sbe.virginia.gov](http://www.sbe.virginia.gov)  
 Voice: 800 - 552 - 9745  
 TTY: 800 - 260 - 3466  
 Richmond local: 804 - 864 - 8901

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VA NR-1 5/11

Notes

- Dec eased
- Out of State
- Personal Request
- Convicted of a Felony
- Judge d Inca pacate d
- Em or Del eted
- NVRA Ca ncel
- Re-Registere d
- Ina ctive Status
- Reac tive
- Tran sfered Out

Other changes

New PCT Authorized by Date changed

New Last Name

New First, Middle/ Maiden Name and Suffix

Date changed

Registration date	PCT	Town code	Denial date & reason	Date changed
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For Office Use Only


<b>COMPLETION OF THE APPLICATION FORM</b>	
1.	Check that <u>all</u> information has been filled in completely. If a box does not apply to an individual, the word 'none' should be written in or a box which indicates 'none' should be marked. Failure to complete the form properly could result in a denial of the application.
2.	Check that the client has signed and dated the application.
3.	On the "return address" portion of the application form, the applicant can mail their completed, signed application to the registrar's office in the county or city where they live. The registrars' office are listed in alphabetical order by the name of the county or city.
4.	No photocopies or other reproductions of the form (i.e., fax) will be accepted.
5.	Place the completed application form in a specified location to be forwarded to the Department of Elections.
<b>INSTRUCTIONS TO COMPLETE THE APPLICATION FORM</b>	
<b><i>Body of the Form</i></b>	
The following is a list of the information to be entered followed by a definition and example, where applicable, of each information block to help answer any questions your client may have:	





No.	INFORMATION BLOCK TITLE	DESCRIPTION	EXAMPLE
5	HAVE YOU EVER BEEN JUDGED TO BE INCAPACITATED?	CHECK EITHER THE 'YES' OR 'NO' BOX TO ANSWER THIS QUESTION. IF YOU HAVE MARKED 'YES' TO THIS QUESTION, ENTER THE MONTH, DAY AND YEAR THE COURT RESTORED YOU TO CAPACITY.	12-4-95
6	<p>REGISTRATION STATEMENT</p> <p>APPLICANT SIGNATURE</p> <p>DATE</p> <p><b>NOTE:</b> YOU MAY REQUEST THAT YOUR HOME ADDRESS NOT BE RELEASED IF YOU OR MEMBER OF YOUR HOUSEHOLD (A) <b>ARE ACTIVE OR RETIRED LAW ENFORCEMENT</b>, OR (B) HAVE BEEN GRANTED A <b>PROTECTIVE COURT ORDER</b>, (C) ARE IN FEAR OF YOUR PERSONAL SAFETY FROM SOMEONE WHO HAS <b>THREATENED OR STALKED</b> YOU AND HAVE FILED A COMPLAINT AGAINST THAT PERSON WITH A MAGISTRATE OR LAW ENFORCEMENT (MUST ATTACH COPY OF COMPLAINT), OR (D) PARTICIPATE IN THE <b>ADDRESS CONFIDENTIALITY</b></p>	<p>READ THE STATEMENT BEFORE SIGNING THE APPLICATION.</p> <p>SIGN THE FORM USING YOUR FULL LEGAL NAME.</p> <p>A PERSON WHO CANNOT SIGN MUST MAKE A MARK. THE PROVIDER MAY THEN WRITE HIS/HER NAME UNDERNEATH THE MARK.</p> <p>POWER OF ATTORNEY CANNOT BE USED FOR VOTER REGISTRATION.</p> <p>ENTER TODAY'S DATE.</p>	<p>JOHN STEWART SMITH</p> <p>3-6-96</p>

6 (CONT.)	<b>PROGRAM. YOU MUST SHOW A VIRGINIA P.O. BOX UNDER MAILING ADDRESS IN BOX 3 ABOVE.</b>		
7	PREVIOUS REGISTRATION INFORMATION	ARE YOU REGISTERED TO VOTE AT ANOTHER ADDRESS? IF YOU ANSWER 'YES', PLEASE FILL IN ALL THE INFORMATION IN THIS SECTION	
<b>BACK OF APPLICATION</b>	VIRGINIA VOTER REGISTRATION APPLICATIONS RECEIPT  NAME OF APPLICANT DATE NAME OF AGENCY  EMAIL ADDRESS  DAYTIME TELEPHONE	ENTER APPLICANTS FULL NAME  ENTER DATE OF APPLICATION  NAME OF AGENCY ACCEPTING APPLICATION  AGENCY EMAIL ADDRESS (IF ONE)  NUMBER OF AGENCY ACCEPTING APPLICATION	JOHN Q. CITIZEN 12/01/2001     (804)555-1212

<b>WHERE TO SEND THE COMPLETED APPLICATION FORM</b>			
At each participating program location within your agency, one individual should be responsible for collecting all completed applications twice a week and forwarding them to the Department of Elections or to their agency's central distribution point determined by the agency or department representative.			
	<b>Review the Section entitled " Completion of the Application Form" before forwarding the forms to the Department of Elections. It is important that all requirements are met before the' application is released from your agency.</b>		
All voter registration application forms must be sent to election officials within five (5) days of receipt. Twice a week, you must complete <u>all</u> of the following steps:			
1.	Enclose all completed application forms in a pre-addressed, coded envelope, supplied by the Department of Elections.		
2.	Mark in the preprinted area on the face of the envelope, the number of forms enclosed.		
3.	Mail the package to the Department of Elections using your agency postage or hand-deliver the envelope to your local registrar.		
	<b>NOTE:</b>	<b>Even when you hand-deliver the forms, place them in a pre-coded envelope since the registrar must tally applications by source.</b>	

**CHAPTER 5 – FORMS AND SUPPLIES**

In accordance with NVRA requirements, the Department of Elections will make available State mail registration forms for private and public distribution. The following information provides general instructions on requesting forms relating to the NVRA.

**THE VOTER REGISTRATION APPLICATION**

The Department of Elections will distribute mail voter registration applications forms to the following entities:

- Public Service Agencies
- Department of Motor Vehicles
- General Registrars

The Department of Elections will also distribute registration application forms to private groups and individuals.

To reorder this form, contact the Department of Elections by phone (804) 864-8910, or fax (804) 371-0914. Ask for or send the request to the attention of NVRA/Voter Registration Coordinator.

**TRANSMITTAL ENVELOPES**

Public agencies\* offering voter registration services will use pre-coded transmittal envelopes to forward the registration applications.

\*This procedure may not apply to those agencies that have made other arrangements with their local registrar

The Department of Elections will distribute pre-coded envelopes to those designated public agencies.

To reorder envelopes, contact the Department of Elections by phone (804) 864-8910, or fax (804) 371-0194.

<b>VOTER REGISTRATION APPLICATION DISPLAY BOXES</b>
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The Department of Elections will supply display boxes to the General Registrars, Public Assistance Agencies, and Department of Motor Vehicles.
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Each group is responsible for determining the number of the voter registration application display boxes and where these boxes will be displayed.
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<b>CHAPTER 6 – CLOSE OF BOOKS</b>
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Applications will be shipped daily, the week prior to the close of books and the week of the close of books.
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It is crucial applications are dated and shipped daily.
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# EXERCISES

<b>Requirements to Register to Vote: True and False Review Questions</b>		
For each of the following statements, put a [T] for true and an [ F] for false.		
1.	_____	A client can remain registered at his old address as well as his new address.
2.	_____	A client who has been convicted of a felony can register to vote.
3.	_____	<i>Virginia Voter Registration Agency Certification</i> forms are to be mailed to the Department of Elections.
4.	_____	A client who will be eighteen at the next general election should be permitted to register in advance and also vote in any intervening primary or special election.
5.	_____	Assistance to applicants may be provided to complete their voter registration application forms.
6.	_____	Virginia does register by party affiliation.
7.	_____	A client must be a resident of Virginia for at least 6 months preceding the next election.
8.	_____	A 16 year-old may register and vote in an election.
9.	_____	If a client cannot come to your office and you go to their home to provide services, you are not required to offer voter registration.
10.	_____	A person who is not a United States citizen may apply to register to vote.
		1) false 2) false 3) false 4) true 5) true 6) false 7) false 8) false 9) false 10) false

<b>Review Questions: Agency-Based Voter Registration Form</b>	
For each of the following statements, circle (○) the letter of the response you believe to be most accurate.	
1.	Clients should be offered the opportunity to apply to register to vote:
	a) during the initial face-to-face interview for your agency's services
	b) when they recertify for your agency's services
	c) when they re-apply for your agency's services
	d) all of the above
2.	Clients can use the voter registration application for all of the following except:
	a) to register to vote in the State of Virginia
	b) to change their name
	c) to change their address
	d) to cast a vote in the primary election
3.	After the client completes the voter registration application, the worker should:
	a) review for completeness
	b) choose a political party for the client
	c) file the application in the client's file
	d) destroy the application
4.	When the client requests a mail registration form, the worker should:
	a) explain that once the form is completed, the client should mail it to the local registrar or return the form back into the office
	b) inform the client that he will receive a notice from the general registrar when his registration is approved
	c) all of the above
5.	May a person vote who has been convicted of a felony and has paid his debt to society?
	a) No. Once convicted of a felony, a person loses his or her right to vote even after the sentence is ended
	b) A person who was convicted of a felony and has completed his/ her prison or jail terms; have been free of any suspended sentences, probation or parole <u>for at least five years</u> ; are not currently facing criminal charges in any jurisdiction; and have paid all court ordered costs, fines, and/or restitutions may petition the Governor to have his/her rights restored to vote.
	c) Once a person is no longer in jail or on parole for a felony conviction, he or she may register to vote.

1) d, 2) d, 3) a, 4) c, 5) b

## **Appendix I - NVRA STATE DESIGNATED PUBLIC ASSISTANCE AGENCIES.**

### *Contacts for Requesting Additional Supplies*

Department of Health	Norma Marrin	804-864-7016
Department of Social Services	Tom Steinhauser	804-726-7362
Department of Aging & Rehabilitative Services	Mary Lutkenhaus	804-662-7610
Department for the Deaf and Hard of Hearing	Christine Ruderson	804-692-9502
Department of Behavioral -Health and Developmental Services	Ruth Anne Walker	804-786-1332
Department for the Blind & Vision Impaired	Jane Ward Solomon	804-371-3112
Virginia Office for Protection and Advocacy	Colleen Miller/Rhonda Comer	804-225-2042
Department of Motor Vehicles	David Pierce	804-367-0515
Department of Game and Inland Fisheries	Raymond Davis	804-367-2387
Virginia Employment Commission, Northern VA Planning District 8	Rick Slusher	703-803-0022
College & Universities-Disabilities Support Service	Jennifer Allman	804-819-4971
Virginia Center for Independent Living	Teresa T. Jones	804-662-7027



## APPENDIX II - LOCAL REGISTRAR LISTING

### DIRECTORY OF LOCAL REGISTRAR OFFICES

	COUNTY	TELEPHONE NUMBER
001	Accomack	757- 787-2935
003	Albemarle	434-972-4173
005	Alleghany	540-965-1690
007	Amelia	804-561-3460
009	Amherst	434-946-9315
011	Appomattox	434-352-5302
013	Arlington	703-228-3456
015	Augusta	540-245-5656
017	Bath	540-839-7266
019	Bedford	540-586-7649
021	Bland	276-688-4441
023	Botetourt	540-473-8235
025	Brunswick	434-848-4414
027	Buchanan	276-935-6534
029	Buckingham	434-969-4304
031	Campbell	434-332-9579
033	Caroline	804-633-9083
035	Carroll	276-730-3035
036	Charles City	804-652-4606
037	Charlotte	434-542-5856
041	Chesterfield	804-748-1471
043	Clarke	540-955-5168
045	Craig	540-864-6190
047	Culpeper	540-825-0652

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
049	Cumberland	804-492-4504
051	Dickenson	276-926-1620
053	Dinwiddie	804-469-4512
057	Essex	804-443-4611
059	Fairfax	703-222-0776
061	Fauquier	540-422-8290
063	Floyd	540-745-9350
065	Fluvanna	434-589-3593
067	Franklin	540-483-3025
069	Frederick	540-665-5660
071	Giles	540-921-2802
073	Gloucester	804-693-3659
075	Goochland	804-556-5803
077	Grayson	276- 773-2842
079	Greene	434-985-5213
081	Greensville	434-348-4228
083	Halifax	434-476-3322
085	Hanover	804-365-6080
087	Henrico	804-501-4347
089	Henry	276-638-5108
091	Highland	540-468-2013
093	Isle of Wight	757-365-6230
095	James City	757-253-6868
097	King & Queen	804-785-5980
099	King George	540- 775-9186

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	COUNTY	TELEPHONE NUMBER
101	King William	804- 769-4952
103	Lancaster	804-462-5277
105	Lee	276-346-7780
107	Loudoun	703-777 -0380
109	Louisa	540-967-3427
111	Lunenburg	434-696-3071
113	Madison	540-948-6533
115	Mathews	804-725-3200
117	Mecklenburg	434- 738-6191 ext.4313
119	Middlesex	804-758-4420
121	Montgomery	540-382-5741
125	Nelson	434-263-4068
127	New Kent	804-966-9699
131	Northampton	757-678-0480
133	Northumberland	804- 580-4655
135	Nottoway	434-645-8148
137	Orange	540-672-5262
139	Page	540-743-3986
141	Patrick	276-694-7206
143	Pittsylvania	434-432-7971
145	Powhatan	804-598-5604
147	Prince Edward	434-392-4767
149	Prince George	804-722-8748
153	Prince William	703-792-6470

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
155	Pulaski	540-980-2111
157	Rappahannock	540-675-5380
159	Richmond	804-333-4772
161	Roanoke	540-772-7500
163	Rockbridge	540-463- 7203
165	Rockingham	540-564-3055
167	Russell	276-889-8006
169	Scott	276-386-3843
171	Shenandoah	540-459-6195
173	Smyth	276-783-7000
175	Southampton	757-653-9280
177	Spotsylvania	540-507-7380
179	Stafford	540-658-4000
181	Surry	757-294-5213
183	Sussex	434-246-1047
185	Tazewell	276-988-1305
187	Warren	540-635-4327
191	Washington	276-676-6227
193	Westmoreland	804-493-8898
195	Wise	276-328-8331
197	Wythe	276-223-6038
199	York	757-890-3440

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	<b>CITY</b>	<b>TELEPHONE NUMBER</b>
510	Alexandria	703-746-4050
515	Bedford	540-587-6007
520	Bristol	276-645-7318
530	Buena Vista	540-261-8605
540	Charlottesville	434-970-3250
550	Chesapeake	757-277-9797
570	Colonial Heights	804-520-9277
580	Covington	540-965-6380
590	Danville	434-799-6560
595	Emporia	434-634-9533
600	Fairfax	703-385- 7890
610	Falls Church	703-248-5085
620	Franklin	757-562-8545
630	Fredericksburg	540-372-1030
640	Galax	276-236-7509
650	Hampton	757-727-6218
660	Harrisonburg	540-432-7707
670	Hopewell	804-541-2232
678	Lexington	540-462-3706
680	Lynchburg	434-847-1609
683	Manassas Park	703-335-8806
685	Manassas	703-257-8230
690	Martinsville	276-403-5122

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	<b>CITY</b>	<b>TELEPHONE NUMBER</b>
700	Newport News	757-926-8683
710	Norfolk	757-664-4353
720	Norton	276-679-1162
730	Petersburg	804-733-2380
735	Poquoson	757-868-3070
740	Portsmouth	757-393-8644
750	Radford	540-267-3156
760	Richmond	804-646-5950
770	Roanoke	540-853-2281
775	Salem	540-375-3034
790	Staunton	540-332-3840
800	Suffolk	757-514-7750
810	Virginia Beach	757-385-8683
820	Waynesboro	540-942-6620
830	Williamsburg	757-220-6157
840	Winchester	540-545-7910

## **DO:**

Do treat the applicant as a customer.

Do let the client know that you can provide assistance in filling out the form.

Do maintain strict neutrality with respect to a person's enrollment choice.

Do provide information about registration deadlines and the registration process.

.Do instruct applicants that they need to re-register whenever they move, even if it is within the same apartment building.

Do inform applicants they will receive notice from the county/city general registrar when their registration is processed.

Do be sure to follow procedures so that registration applications are handled properly and processed in a timely fashion.

Do allow the customer to choose to use a mail-in registration form.

## **DON'T:**

Don't attempt to influence an applicant's political preference or party affiliation.

Don't display any political or party preference.

Don't attempt to discourage an applicant from registering to vote.

Don't lead the applicant to believe that the decision to register, or not to register, will affect the availability of services or benefits.

Don't attempt to determine the applicant's eligibility to register - that's up to the county/city registrar.

Don't in any way pressure the client to fill out the registration form.

## NOTES



## NOTES

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