

YOUR VOTE MATTERS

DON'T LOSE IT



Contact Elections Team

Direct 01252 398824

Email elections@rushmoor.gov.uk

Date

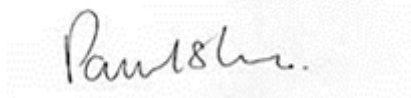
Proxy Vote Application (definite or indefinite period)

If you would like to set up a proxy vote, please complete the form. Your application must be supported if it is for an indefinite period - please see final page regarding supporting information.

If you require any further assistance or information before completing and returning this proxy application form to us at the address shown above, please telephone the Elections Team on the above number or email address.

If you do not want to apply for a proxy vote please ignore this letter and enclosed form.

Yours sincerely



Electoral Registration Officer

Privacy Statement

We will only use the information you give us for electoral purposes. We will look after personal information securely and we will follow the Data Protection legislation. We will not give personal information about you or any personal information you may provide on other people to anyone else or another organisation unless we have to by law.

The lawful basis to collect the information in this form is that it is necessary for the performance of a task carried out in the public interest and exercise of official authority as vested in the Electoral Registration Officer as set out in Representation of the People Act 1983 and associated regulations.

Some of the information that is collected in this form is classified as special category personal data. This is processed for reason of substantial public interest as set out in Representation of the People Act 1983 and associated regulations. To process this type of information the Data Controller must have a relevant policy document that sets out how this information will be handled.

The Electoral Registration Officer is the Data Controller. You should refer to the Privacy Notice at www.rushmoor.gov.uk/postandproxyprivacynotice for further information relating to the processing of personal data.

Am I eligible to vote by proxy?

Anyone who is registered can apply for a proxy vote.

When you apply for a proxy vote you must provide a reason. You can apply for a proxy vote if:

- you are unable to go to the polling station for one particular election, for example, if you are away on holiday
- you have a physical condition that means you cannot go to the polling station on election day
- your employment means that you cannot go to the polling station on election day
- your attendance on an educational course means that you cannot go to the polling station on election day
- you are a British citizen living overseas
- you are a crown servant or a member of Her Majesty's Armed Forces

The person you wish to appoint as your proxy can only act as proxy if they are 18 or over (at Scottish Parliamentary and local government elections only this is 16 or over) and they are (or will be) registered for that election or referendum.

A person cannot be a proxy for more than two people at any one election or referendum, unless they are a close relative.

Do I need to apply again if I have changed address?

Yes. If you change address, you will need to make a new application to vote by post or by proxy – your voting preference will not be carried forward to your new address.

Being appointed as a proxy

If you have been appointed as someone's proxy, this means you can cast their vote on their behalf.

You can only be a proxy for close relatives (defined as your spouse, civil partner, parent, grandparent, brother, sister, child or grandchild) and up to two other people.

You can only act as proxy if you are 18 or over (16 or over in Scotland at Scottish Parliamentary and local council elections) and you are (or will be) registered for that election or referendum.

The person who appointed you will tell you how they want you to vote on their behalf, for example, which candidate, party, or outcome.

How to vote as someone's proxy

You must go to the polling station of the person who appointed you as their proxy. If you can't go to their polling station, you can apply to vote for them by post up to 5pm, 11 working days before the poll.

You will receive a proxy poll card telling you where and when to cast their vote for them.

If you don't receive a proxy poll card, you should check with the local council of the person who has appointed you as their proxy. They will be able to tell you where to go to vote.

The person who appointed you as their proxy may still vote in person, provided they do so before you have voted for them, or you have not applied to vote as their proxy by post

PROXY VOTE APPLICATION FORM

Please read the guidance notes carefully before completing this form. If you need help filling in this form please phone 01252 398824. Please write in **BLACK INK and BLOCK CAPITALS**. Please complete both sides of this form if you are applying for a proxy vote for an indefinite period and return to Elections Office, Rushmoor Borough Council, Council Offices, Farnborough Road, Farnborough, Hampshire. GU14 7JU or a scanned clear copy to elections@rushmoor.gov.uk.

1 About you

First name(s) (in full)

Surname

Address where you are register to vote

Daytime or mobile telephone or email (Optional)

2 About your proxy

Full Name

Full Address

Relationship to you (if any)

3 Proxy vote for which elections? (tick box)

All elections at which you are entitled to vote

Local elections

Parliamentary elections / referendums

4 For how long do you want a proxy vote (complete either (a) or (b))?

I wish to vote by proxy whilst I am still at my present address (select one option)

(a) Until further notice

(Supporting information requires completion)

OR

(b) For the election held on

D	D
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M	M
---	---

Y	Y	Y	Y
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5 Your date of birth and declaration

Declaration: 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. I understand that to provide false information on this form is an offence, punishable on conviction by imprisonment of up to 2 years and/or a fine.

Date of birth: Please write your date of birth 'DD MM YYYY' in the black boxes below, **using black ink**

D	D
---	---

M	M
---	---

Y	Y	Y	Y
---	---	---	---

Signature: Sign below, keeping within the grey border.

Date of application

_____ (Today's date)

Supporting information

Your application DOES NOT have to be supported by someone else if you are registered Blind OR in receipt of a higher rate of the mobility component of a disability living allowance OR the enhanced rate of the mobility component of the personal independence payment OR an armed forces independence payment.

However, you must give the relevant number below:

I am Registered Blind by _____ Local Authority

and my registered number is _____

OR I am currently in receipt of _____ (benefit payment)

and my allowance number is _____

You should now return the form as requested.

Supporting declarations - disabled, mental hospital detainees or others

Who can support my application?

- If you have a long term illness or disability which makes it difficult for you to vote in person. It must be supported by one of the following:
- *either a registered medical practitioner (including a dentist, optician, pharmacist, osteopath, chiropractor and psychologist), a registered nurse, a Christian Science practitioner, a registered health professional, a registered social worker. If you are in a residential home or sheltered housing, the matron, home care director or warden may support your application.*
- If your job or educational course, or that of your spouse, takes you away from home for long periods (e.g. travelling salesman, long distance lorry driver). Your application must be supported by:
- *either your employer or your spouse's employer. In the case of a course then by the institution holding the course*

If you are self-employed your supporter must be 18 or over, know you and not related to you.

Support for this application

To be completed by your Supporter as fully as possible (where relevant)

Name of Supporter:

Address of Supporter:

Capacity in which the support is made

Nature of physical incapacity of elector (if relevant)

The statutory provision under which the applicant is detained (in the case of mental health patients)

The job or course giving rise to this application

Supporter's declaration

* delete if not applicable

I am properly qualified to support this application.

- * I am treating the applicant for the disability
- * The person is receiving care from me in respect of that disability
- * I have arranged care or assistance for them.
- * The applicant cannot reasonably be expected to go in person to the allotted polling station or to vote unaided there by reason of that disability.
- * The applicant is self-employed

The information is true to the best of my knowledge and belief

Signature: _____

Date: _____