



# South Dakota - Absentee Ballot Request Form

County



Use this form to request  
an absentee ballot.

**Name**

**Required**

**1**

Last Name	First Name	Middle Name	Suffix
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**Voter Registration Address**

**Required**

Write your voter registration address and/or describe where you live.

Failure to provide a voter registration address and/or a description of the location of your residence will give rise to the presumption that you are not a resident of this state for the purposes of SDCL 12-1-4 and will result in you being designated a federal voter.

**2**

Voter Registration Address		Apt # or Lot #
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City or Town	State	Zip Code
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**OR**

If you live in a rural area and do not have a street address; if your address is a commercial mail receiving agency, mail forwarding service, or other post office box; or if you have no address, please describe the physical location of your residence in writing or by drawing a map, which may include writing the names of the streets or intersections nearest to where you live and listing any landmarks (e.g., schools, churches, stores) near where you live, in the space provided. If you do not have enough room in the space provided, use the back of this form.

**Mailing Address**

If different from your address in section 2

**3**

Mailing Address	Apt # or Lot #
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City or Town	State	Zip Code
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**Choose Your  
Election(s) and  
Ballot Styles**

**Required**

**4**

Please choose from the following:

All

General

Primary

Municipal

School

Any Other

You will receive the Primary Election ballot of your party, if one is available. If you are registered as an independent/no party affiliation voter and are requesting a Primary Election ballot, you may choose one of the following:

Democratic

Libertarian

Non-Political

**If the Request is  
for a Municipal or  
School Election**

**5**

I have lived in the jurisdiction for at least 30 days in the last year.

Yes

No

I am a full-time student who resided in the jurisdiction prior to leaving.

Yes

No

I am a member of the Uniformed Services or Merchant Marine on active duty whose home of record is within this jurisdiction.

Yes

No

**Military and  
Overseas  
Citizens Only**

Any person who answers "Yes" to one of the following questions is not required to submit a copy of the voter's ID.

**6**

I am a member of the Uniformed Services or Merchant Marine on active duty.

Yes

No

I am a U.S. citizen residing outside the United States.

Yes

No

I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty.

Yes

No

Any military and overseas voter may submit a signed application for an absentee ballot by fax or e-mail.

For a Primary or General Election, send my ballot electronically using my email address.

Email Address

**Identification and  
Declaration**

**Required**

Choose one:

You may sign an oath in front of a notary public; or

Submit a copy of a valid photo ID. Check the instructions on the back for a list of all accepted forms of identification.

**7**

I hereby verify that I am the person named above and these statements made by me on this application are true and correct.

**OR**

I have attached a copy of photo identification.

**Voter, sign here** (If a notary is required, you must sign your name in front of the notary and not before.)

**X**

Today's Date

Month

Day

Year

**For notary** (If no photo identification is attached.)

Sworn to me before this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Notary signature \_\_\_\_\_

My commission expires \_\_\_\_\_

(Notary Seal)

Turn over for instructions  
and additional questions



## Contact Information

8

Phone Number

### Assign an Authorized Messenger

If you are unable to receive or deliver your absentee ballot due to an illness or disability, you can assign someone to be your authorized messenger.

#### Authorized messenger, complete the following:

Last Name	First Name	
Phone Number		
Authorized Messenger's Address		
City or Town	State	Zip Code
Apt # or Lot #		

As the authorized messenger, I acknowledge receipt of the ballot for the above named voter on...

Date	Time	
Month	Day	Year

9

Are you serving as an authorized messenger for any other voter? Yes No

Authorized messenger, sign here

X	Today's Date
	Month Day Year

#### Voter authorization

As a registered voter, I authorize the following person to serve as my authorized messenger to pick up my absentee ballot. I further certify under penalty of law that I am confined because of sickness or disability and for this reason alone am unable to vote at my polling place on Election Day.

Voter, sign here

X	Today's Date
	Month Day Year

### Need more space to describe where you live or draw a map?

Use the space below to write more details about your location or draw a map.



## South Dakota Absentee Ballot Request Form Instructions

### What is the deadline to apply for an absentee ballot?

You may apply for an absentee ballot with your county auditor up to five p.m. or the end of regular office hours, whichever is later, on the day before an election. If you are confined due to sickness or disability, you may request an absentee ballot through an authorized messenger up to three p.m. on the day of an election.

### What is the deadline to return an absentee ballot?

You must return your absentee ballot to your county auditor before the polls close in the county. If you return your absentee ballot after polls close in the county, your ballot will not be opened or counted.

### Do I have to complete a new application for each election?

A new application must be completed EACH calendar year.

### How do I submit my absentee ballot request form?

Please print and return to the county auditor in the county you are registered.

### Which forms of photo ID are accepted?

- South Dakota driver's license or nondriver ID
- U.S. passport or other U.S. government-issued photo ID
- Military ID
- Current student ID from a South Dakota high school or college
- Tribal photo ID