

**OFFICE OF THE ELECTORAL COMMISSION
APPLICATION FORM
PRE-POLLING**

Reference No.....

To the Electoral Commissioner,

Pursuant to Section 61 (1) and (2),

I,
(Matai Title) (First Name) (Last Name)

a registered voter of
(Electoral Constituency)

.....
(Date of Birth) (Residence Village) (Village Vote) (Gender) (Occupation)
.....
(Employer) (Email) (Mobile Number) (Work/Other Contact Numbers)

wish to apply for pre-polling

Qualifications: (Please tick appropriate box)

- (a) Travels outside of Samoa during the designated period under section 60(2);
- (b) Is 65 years old or above;
- (c) Is a person living with disabilities;

Supporting Documents

- Birth Certificate/Pension ID Card
- itinerary/Tickets
- Medical Certificate/Documents (If Applicable)
- Passport/Any form of ID
- Others
Specify.....

DATED at this day of 20

.....
(APPLICANT SIGNATURE)