

Tennessee Mail-In Application For Voter Registration

You can use this form to:

1

2

Residential Address:

(no PO box) Apt #:

City:

State: Zip Code:

County:

Email (optional):

Mailing Address (if different):

3 LAST ADDRESS OF VOTER REGISTRATION (if any)

Name: _____ Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____ County: _____

4 FELONY CONVICTION Have you ever been convicted of a felony? (If expunged, answer "no") F YES F NO If yes, provide the following information (if known).

Crime(s): _____ Date (mo./yr.): _____

Place (city/state): _____ Have you received a pardon or had your voting rights restored? F YES F NO If yes, provide copy of document.

5 I CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT.

