



## Online Absentee Application Guide

Although the online absentee application process is straightforward and asks the same questions as the physical form, a detailed guide below will assist you should you need any help.

- 1) Click or type this link in your browser's address bar to be taken directly to the application form – <https://www.voteenmi.gov.mp/voter/online-absentee-application-form.php>  
*Note: This link will not work until August 25<sup>th</sup> when the Absentee application opens.*
- 2) You will see the image below. Read the information carefully. If this is your first time filling out the application, select the **Let Us Begin** button.

The Commonwealth Election Commission has established a secure online absentee application form to ensure your application is submitted and received in a prompt and efficient manner. In order to provide security and authenticity of an application, an email address is required for each individual applying. If you do not have an email address, please get one from various email portals online. An email address can only be used once to apply for absentee voting in an election year.


*Note: After submitting your application and you did not get an email, please check your SPAM or junk folder as the email may have been flagged and placed there.*

Is this your first time using the Online Absentee Application Form? Please select your answer by clicking on a button below.

**Yes, Let Us Begin →**      **No (more info)**

A new window will open in full screen

- 3) You will be taken to the introduction page as seen below. Your display will automatically expand to full screen for a better experience.

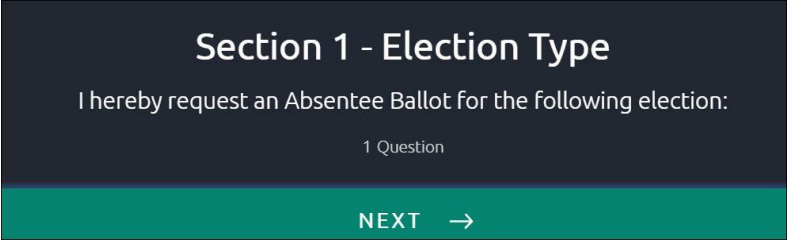


### Hāfa Adai - Tiroow - Welcome

This secure online form will make registering for absentee voting easier. We will now begin to collect some information from you. Please answer the questions as accurately as possible. Some fields are required and must not be omitted, except as noted. Please review your information for accuracy before submitting the form. Thank you!

**START →**

- 4) Click the **START** button at the bottom to start the application process.
- 5) You will see the next screen below. Click **NEXT**



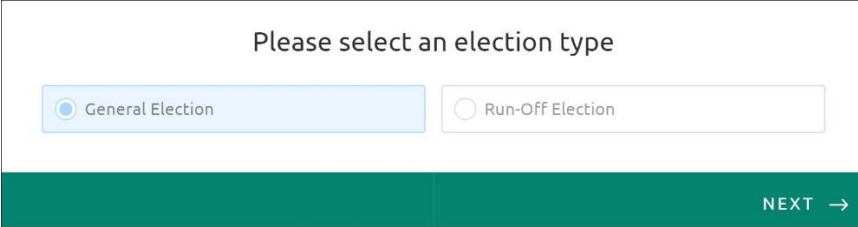
Section 1 - Election Type

I hereby request an Absentee Ballot for the following election:

1 Question

NEXT →

- 6) You will see the next screen below. **General Election** is automatically selected. Click **NEXT**.



Please select an election type

☒ General Election ☐ Run-Off Election

NEXT →

- 7) You will see the next screen below. The **election year** is automatically set for you. Click **NEXT**.



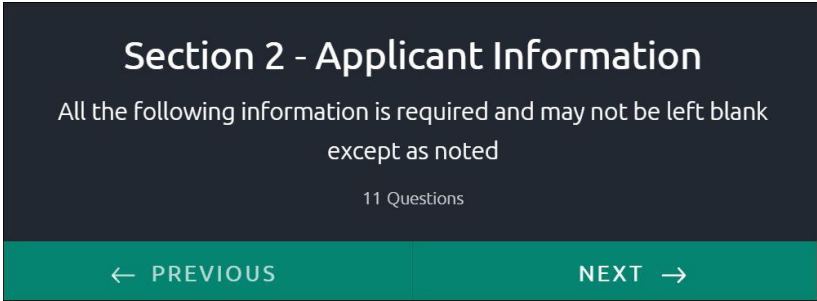
General Election Year\*

Please enter the year of the General Election

2022

← PREVIOUS NEXT →

- 8) You will see the next screen below. Please click **NEXT**.



Section 2 - Applicant Information

All the following information is required and may not be left blank except as noted

11 Questions

← PREVIOUS NEXT →

- 9) You will see the next screen below. Please enter the **last 4 digits** of your social security number. *This is a required field and cannot be left blank.* Click **NEXT**.

**Last 4 digits of your Social Security Number\***

Please enter the last four (4) digits of your social security number

← PREVIOUS    This field is required.    NEXT →

- 10) You will see the next screen below. Enter your date of birth. You can pick your date by clicking on the calendar icon on the right or typing it in. **Example, 01/01/1970.** *This is a required field and cannot be left blank.* Click **NEXT**.

**Date of Birth\***

Please enter your date of birth

mm/dd/yyyy

← PREVIOUS    This field is required.    NEXT →

- 11) You will see the next screen below. Enter your gender. Click the down arrow to select your gender. Only accepts Male or Female. *This field is required and cannot be left blank.* Click **NEXT**.

**Gender\***

Please enter your gender

← PREVIOUS    This field is required.    NEXT →

- 12) You will see the next screen below. Enter your First, Middle, and Last name. *The First and Last names are required, while the Middle name is optional.* Click **NEXT**.

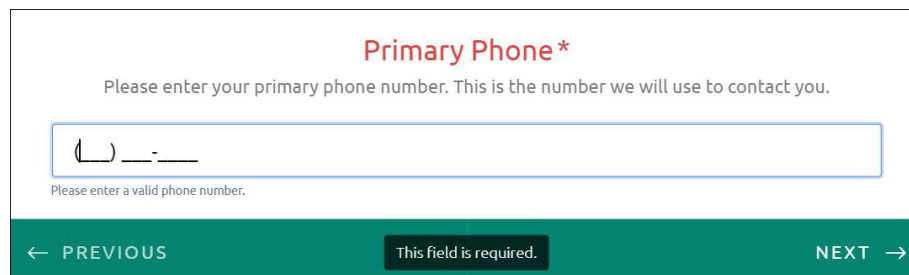
**Full Name\***

Please enter your full name

First Name    Middle Name    Last Name

← PREVIOUS    This field is required.    NEXT →

- 13) You will see the next screen below. Enter your **Primary** phone number. This is the number we will use to contact you should we need further information about your application. *This field is required and cannot be left blank.* Click **NEXT**.



**Primary Phone \***

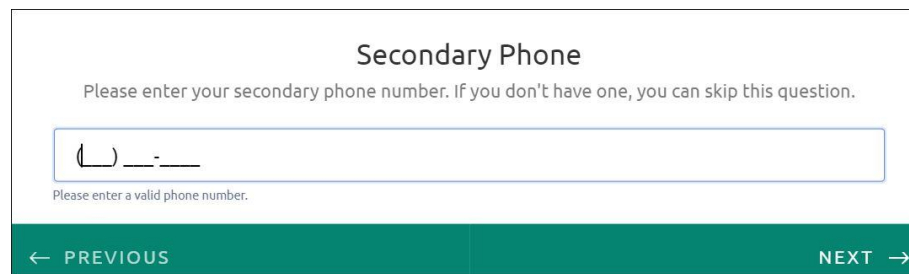
Please enter your primary phone number. This is the number we will use to contact you.

( ) - -

Please enter a valid phone number.

← PREVIOUS      This field is required.      NEXT →

- 14) You will see the next screen below. Enter your **Secondary** phone number. *This field is not required but an alternate phone number will be good if we cannot get in touch with you with your primary number.* Click **NEXT**.



**Secondary Phone**

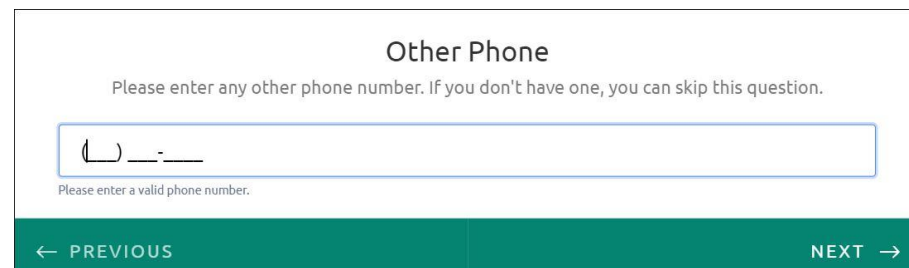
Please enter your secondary phone number. If you don't have one, you can skip this question.

( ) - -

Please enter a valid phone number.

← PREVIOUS      NEXT →

- 15) You will see the next screen below. Enter your **Other** phone number. *This field is not required but an alternate phone number will be good if we cannot get in touch with you with either your primary or secondary numbers.* Click **NEXT**.



**Other Phone**

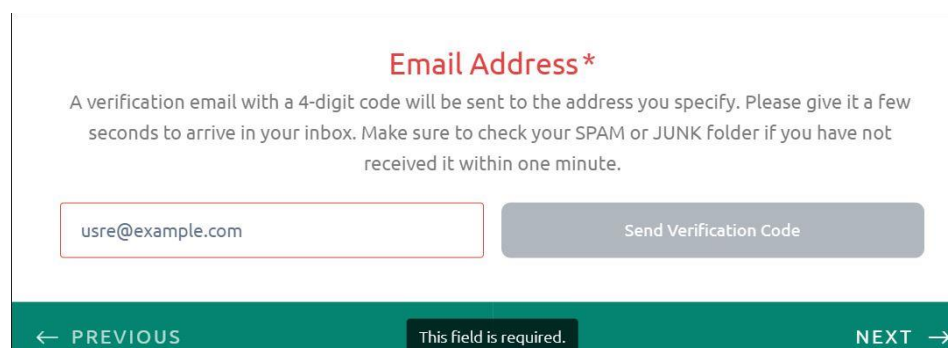
Please enter any other phone number. If you don't have one, you can skip this question.

( ) - -

Please enter a valid phone number.

← PREVIOUS      NEXT →

- 16) You will see the next screen below. Enter your **Email Address** and click on the **Send Verification Code** button on the right. Once you enter your email address, the verification button will turn blue. Please make sure that your email address is correctly entered before you click on the button. To ensure that the address you entered is valid and working, a verification code will be sent to that address.



**Email Address \***

A verification email with a 4-digit code will be sent to the address you specify. Please give it a few seconds to arrive in your inbox. Make sure to check your SPAM or JUNK folder if you have not received it within one minute.

usre@example.com      Send Verification Code

← PREVIOUS      This field is required.      NEXT →

- 17) Please check your email and look for an email from **Jotform** with the subject **“Email Verification Code Regarding APPLICATION FOR ABSENTEE VOTING”** scroll down and you will see a 4-digit

code. If you did not get the email and you are sure you entered your email address correctly, please check your SPAM or JUNK folder as it may have been flagged as such.

Enter that code in the box provided like in the image below. *The code will only work for 5 minutes and will expire if not validated within that timeframe. If that happens, you can resend the code by clicking the **RESEND CODE** link at the bottom.*

Enter code here

Resend code

### Email Address \*

A verification email with a 4-digit code will be sent to the address you specify. Please give it a few seconds to arrive in your inbox. Make sure to check your SPAM or JUNK folder if you have not received it within one minute.

The verification code has been sent to [user@gmail.com](#)  
Please check your mailbox and paste the code below to complete verification

Didn't receive verification code? [RESEND CODE](#) or [CHANGE EMAIL](#)  
Receiving the email may take a few minutes, thank you for your patience!


← PREVIOUS You need to validate this e-mail NEXT →

Once your email address is validated, you will see a blue circle with a checkmark, like in the image below. **Click NEXT.**

Validated

### Email Address \*

A verification email with a 4-digit code will be sent to the address you specify. Please give it a few seconds to arrive in your inbox. Make sure to check your SPAM or JUNK folder if you have not received it within one minute.



usre@example.com

← PREVIOUS NEXT →

- 18)** You will see the screen below. Enter your **CNMI Residential Address**. This is your physical address. Enter your street name only. No P.O. Box or General Delivery. *This field is required and cannot be left blank.* **Click NEXT.**

### CNMI Residential Address (No P.O. Box or General Delivery) \*

Please enter your CNMI residential address only

Street Address

Island Precinct (Village)

Zip Code

← PREVIOUS NEXT →

19) You will see the screen below. Enter your **Mailing Address**. This is the address where you receive your postal mail. *This field is required and cannot be left blank.* Click **NEXT**.

The screenshot shows a web form titled "CNMI Mailing Address\*" with the instruction "Please enter your CNMI mailing address". It features three input fields: a large one for the street address containing "P.O. Box 123456", a smaller one for the island containing "Saipan", and another for the postal/zip code containing "96950". Below the first field is the label "Street Address, P.O. Box, or General Delivery". Below the second is "Island". Below the third is "Postal / Zip Code". At the bottom are two green buttons: "← PREVIOUS" on the left and "NEXT →" on the right.

20) You will see the next screen below. Enter the **Reason for your Absence**. *This is a required field and cannot be left blank.* Click **NEXT**.

The screenshot shows a web form titled "Reason for Absence\*" with the instruction "State your reason for voting absentee". It has a single large text input field containing the text "School, Military, Off island conference, training, or seminar, etc.". At the bottom are two green buttons: "← PREVIOUS" on the left and "NEXT →" on the right.

21) You will see the screen below. Click **NEXT**.

The screenshot shows a dark-themed screen with the title "Section 3 - Mail Absentee Ballot To" in large white text. Below the title, it says "All the following information is required and may not be left blank, except as noted" and "2 Questions". At the bottom are two green buttons: "← PREVIOUS" on the left and "NEXT →" on the right.

22) You will see the screen below. Enter your **Full Name**. This section has been automatically filled out from previous form data. *This is a required field and cannot be left blank.* Click **NEXT**.

**Full Name \***

Please enter your full name. (Note: This form has been pre-populated from previous name data)

John		Doe
First Name	Middle Name	Last Name

← PREVIOUS
NEXT →

**23)** You will see the screen below. Enter your **Forwarding Address**. This is the address where you receive your postal mail in the state or country you currently live in. Click **NEXT**.

**Forwarding Address \***

Enter your current mailing address. To prevent delays and to ensure that your absentee ballot reaches you on time, please make sure there are no errors before proceeding

12345 South Brunswick Avenue

Street Address, P.O. Box, or General Delivery

Apt. #1232

Apartment/Suite

Honolulu	HI
City	State/Province
96814	United States ▼
Zip Code	Country

← PREVIOUS
NEXT →

**24)** You will see the screen below. Click **NEXT**.

Section 4 - I hereby affirm that: 1) I am the person named in this application; 2) I am requesting an absentee ballot for myself and no other; and 3) all information furnished on this application is true and correct.

2 Questions

← PREVIOUS
NEXT →

**25)** You will see the screen below. **Sign your application** in the box provided. Please make sure you sign within the box. If you have a touchscreen, you can use a stylus or your index finger to sign, otherwise, use your mouse. If you make a mistake, you can start over by clearing the errored signature by clicking on the **Clear** (red arrow below) link at the bottom right corner of the signature box. *This is a required field and cannot be left blank.* Click **NEXT**.



- 26) You will see the screen below. Enter the **date of signature**. You can either write the date in the format mm/dd/YYYY (Example, 01/01/1970) or by clicking on the calendar icon on the right. *This is a required field and cannot be left blank.* Click **NEXT**.

- 27) You will see the screen below. If you are not able to sign your application, you are required to have a witness sign for you if you mark the **Signature** box with an 'X' (no quotes). **If this does not apply to you, skip the next few sections.** Click **NEXT**.

- 28) You will see the screen below. To streamline this process, the witness section will be skipped if a witness is not required. Please select **NO** if you do not need a witness and you will be taken directly to the **Signature Verification** section. Select **YES** if you do and the witness questionnaire will follow after selecting **YES**.



Do you need a witness?\*

If you are able to sign the application form, you do not need a witness, select NO below. However, if you do, select YES.

YES NO

← PREVIOUS NEXT →

- 29) You will see the image below if you selected **YES**. **Sign your application** in the box provided. Please make sure you sign within the box. If you have a touchscreen, you can use a stylus or your index finger to sign, otherwise, use your mouse. If you make a mistake, you can start over by clearing the errored signature by clicking on the **Clear** (red arrow below) link at the bottom right corner of the signature box. *This is a required field and cannot be left blank.* Click **NEXT**.

Signature of witness (required only if applicant makes a mark on the signature field with an 'X')

Please use your mouse, stylus or your finger to sign within the box if you have a touchscreen. If part of your signature gets cutoff, please clear it and sign again

Clear

← PREVIOUS NEXT →

- 30) You will see the screen below. Enter the **date of signature**. You can either write the date in the format mm/dd/YYYY (Example, 01/01/1970) or by clicking on the calendar icon on the right. *This is a required field and cannot be left blank.* Click **NEXT**.

Date\*

Date of witness signature

mm/dd/yyyy

Date Witness Signed

← PREVIOUS This field is required. NEXT →

- 31) You will see the image below. Enter **address** information of witness. *This is a required field and cannot be left blank.* Click **NEXT**.

**Address of Witness \***

Current mailing address of witness

Street Address, P.O. Box, or General Delivery

Apartment/Suite

City

State/Province

Zip Code

United States

Country

← PREVIOUS
This field is required.
NEXT →

32) You will see the image below. Enter the **primary phone** number of witness. *This is a required field and cannot be left blank.* Click **NEXT**.

**Primary phone number of witness \***

Please enter a phone number of witness

Please enter a valid phone number.

← PREVIOUS
This field is required.
NEXT →

33) You will see the image below. Please upload. Please upload a photo of a picture identification document such as a driver's license or passport. If your signature and photo are not on the same page, you can take a picture separately. Click on the **BROWSE FILES** (see red arrow below) button on the right. A file dialog box will open. Please find the image(s) and select for upload. You can upload up to 4 images and **JPG and PNG** formats are only allowed. *This is a required field and cannot be left blank.*

**Signature Verification \***

Please upload an image of either a driver's license or a passport where your name and signature are clearly visible. If you are a witness, please upload yours instead of the applicant.

**Drag and drop files here**

Max. file size: 10.0MB

JPG and PNG file formats only, and you can upload up to 4 files.


BROWSE FILES

← PREVIOUS
NEXT →

34) Once you selected the file(s), you will see the image below. A blue circle with a checkmark (see red arrow below) indicates that everything is OK. *This is a required field and cannot be left blank.* Click **NEXT**.


**Signature Verification \***

Please upload an image of either a driver's license or a passport where your name and signature are clearly visible. If you are a witness, please upload yours instead of the applicant.

 **Drag and drop files here**  
Max. file size: 10.0MB

**BROWSE FILES**

**sig-dsc.png**  
0.2MB



JPG and PNG file formats only, and you can upload up to 4 files.

← PREVIOUSNEXT →

**35)** You will see the image below. Click the **REVIEW AND SUBMIT** (red arrow) button on the low right-hand corner to review your answers. If everything looks good, click **SUBMIT** (yellow arrow).

**NOTICE:** Pursuant to the CNMI Election Statute, the Commonwealth Election Commission may use this application to transfer a voter to the proper election precinct/district to correspond with the address given above.

← PREVIOUS**REVIEW AND SUBMIT**

If you need to make changes, click **BACK TO FORM** (orange arrow) and go to the section where you need to make a change by clicking the **PREVIOUS** (black arrow) button.

**APPLICATION FOR ABSENTEE VOTING**

1. Please select an election type  
**General Election**

2. General Election Year  
**2022**

3. Last 4 digits of your Social Security Number  
**2342**

4. Date of Birth  
**08/08/1980**

5. Gender  
**Male**

**BACK TO FORM****SUBMIT**

**NOTICE:** Pursuant to the CNMI Election Statute, the Commonwealth Election Commission may use this application to transfer a voter to the proper election precinct/district to correspond with the address given above.

← PREVIOUS REVIEW AND SUBMIT

An alternate way to go to a section to make changes is in the navigation bar at the bottom (see image below). You can click on the green dots and the title of the section will show. Click on it and you will be taken directly to a section.

You can also preview your application by clicking on the **Preview PDF** link (red arrow). Click the **Back to Form** (see black arrow in the second image below) button on the top left-hand corner to go back to the form.

24 of 24 Preview PDF

← Back to Form APPLICATION FOR ABSENTEE VOTING

1 of 1

COMMONWEALTH ELECTION COMMISSION  
**APPLICATION FOR ABSENTEE VOTING**  
(CNMI REGISTERED VOTERS ONLY)

Section 1 - I hereby request an Absentee Ballot for the following election:

General Election – Year: 2022 Run-Off Election – Year: \_\_\_\_\_

Section 2 - Applicant Information (Application will not be accepted if all fields are not completed)

Once you are done making your change(s), click the **REVIEW AND SUBMIT** button again to review your answers. If everything looks good, click the **SUBMIT** button (red arrow on the image below) in the lower right-hand corner.

APPLICATION FOR ABSENTEE VOTING

1. Please select an election type  
**General Election**

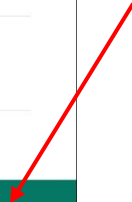
2. General Election Year  
**2022**

3. Last 4 digits of your Social Security Number  
**2342**

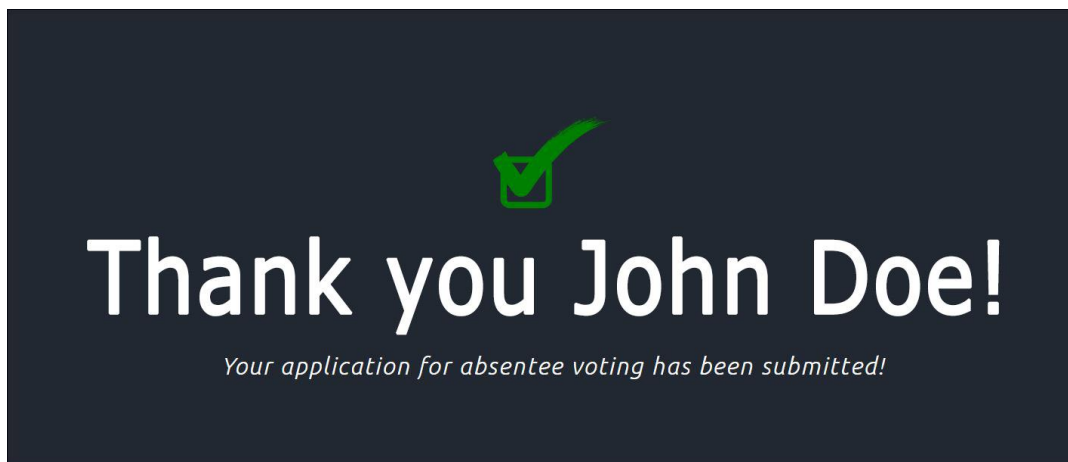
4. Date of Birth  
**08/08/1980**

5. Gender  
**Male**

**BACK TO FORM** **SUBMIT**



**36)** You will see the image below after your application is sent successfully to CEC. In a few minutes, you will receive an email from CEC that your application has been received. Your application is attached to this email. Please download it for your records. If you did not receive the email, please check your **SPAM** or **JUNK** folder as it may have been flagged and placed there.



**37)** If you have any questions after you submitted your application, please contact CEC on its website's Contact page, email at [absentee@votecnmi.gov.mp](mailto:absentee@votecnmi.gov.mp), or by telephone at (670) 235-8683/8682/8685.