



取消非公民選民登記申請表 2024 年 11 月 5 日 教育委員會選舉

非美國公民須知

您向選務處提供的任何資料，包括您的姓名與地址，可能會被移民及海關執法局（Immigration and Customs Enforcement，簡稱ICE）以及其他機構、組織和個人取得。此外，如果您申請歸化入籍，您將會被詢問是否曾經在美國的聯邦、州或地方選舉中登記或投票。在您向選務處提供任何個人資料，以及登記參加三藩市教育委員會選舉的投票之前，不妨向移民律師、移民權利的維權組織、或其他熟悉此事務人士諮詢意見。您可以在 [sfelections.org](https://www.sfelections.org) 找到專門保護移民權利的非營利組織名單。


如您要取消 2024 年 11 月 5 日教育委員會選舉的選民登記，請填妥、簽署並把此表格交回選務處。

選務處需要 3 至 5 個工作天處理申請。如要確認您的選民登記是否已經取消，請致電 (415) 554-4367。

1. 填寫個人資料及簽署（用英文正楷）

姓 _____ 名 _____ 中間名 _____ 出生日期：月/日/年 _____

您登記的三藩市住宅地址 _____ San Francisco, CA _____ 郵政編號 _____

在此簽署  _____ 日期 _____

2. 交回此表格

電郵（附上申請表的掃描檔案）： SFVote@sfgov.org（主題：申請取消非公民選民登記 Cancellation Request for Non-Citizen Voting）
傳真： (415) 554-4372
郵寄或親身交回： Department of Elections
1 Dr. Carlton B. Goodlett Place
City Hall, Room 48
San Francisco, CA 94102



Request to Cancel Voter Registration for Non-Citizens November 5, 2024, School Board Election

IMPORTANT NOTICE FOR NON-UNITED STATES CITIZENS

Any information you provide to the Department of Elections, including your name and address, may be obtained by Immigration and Customs Enforcement (ICE) and other agencies, organizations, and individuals. In addition, if you apply for naturalization, you will be asked whether you have ever registered or voted in a federal, state, or local election in the United States. You may wish to consult with an immigration attorney, an organization that protects immigrant rights, or other knowledgeable source before providing any personal information to the Department of Elections and before registering to vote in San Francisco Board of Education Elections. You can find a list of nonprofit organizations that specialize in protecting the rights of immigrants on sfelections.org.

To cancel your voter registration for the November 5, 2024, School Board Election, complete, sign, and return this form to the Department of Elections.

Please allow the Department 3-5 business days for processing. You may confirm the cancellation of your voter registration by contacting the Department at (415) 554-4375.

1. Complete and Sign

_____ / ____ / _____
Last Name **First Name** **Middle** **Birth Date: MM DD YYYY**

_____ San Francisco, CA _____
San Francisco Residential Address where you are registered **ZIP Code**

Sign Here  _____ **Date** _____

2. Return This Form

Email as scanned attachment: SFVote@sfgov.org (use subject line: Cancellation Request for Non-Citizen Voting)
 Fax: (415) 554-4372
 Mail or in person: Department of Elections
 1 Dr. Carlton B. Goodlett Place
 City Hall, Room 48
 San Francisco, CA 94102