FORM 6

State Board of Elections

Notice of Public Hearing to Adopt Rule

A public hearing will be held in the Secretary of State Business Office, 215 E. Prospect Avenue, Pierre, SD 57501, on Wednesday, March 15, 2023, at 1:30 P.M. Central/ 12:30 P.M. Mountain, to consider the adoption and amendment of proposed Administrative Rule of South Dakota numbered

§ 05:02:03:01.

The effect of the rules will be to change the Voter Registration Form in accordance with the Settlement and resulting Court Order in Rosebud Sioux Tribe, et. al. v. Steve Barnett, in his official capacity as Secretary of State, et. al. CIV. No. 5:20-CV-5058-LLP (D.S.D.).

The reason for adopting the proposed rules is to comply with the settlement and resulting Court Order in in Rosebud Sioux Tribe, et. al. v. Steve Barnett, in his official capacity as Secretary of State, et. al. CIV. No. 5:20-CV-5058-LLP (D.S.D.).

Persons interested in presenting amendments, data, opinions, and arguments for or against the proposed rules may appear in-person at the hearing, or mail or e-mail them to State Board of Elections; 500 E. Capitol Avenue, Pierre, SD 57501, elections@state.sd.us. The deadline to submit any such written comments for consideration by this part-time board is seventy-two hours before the date of the public hearing.

After the written comment period, the State Board of Elections will consider all written and oral comments it receives on the proposed rules. The State Board of Elections may modify or amend a proposed rule at that time to include or exclude matters that are described in this notice.

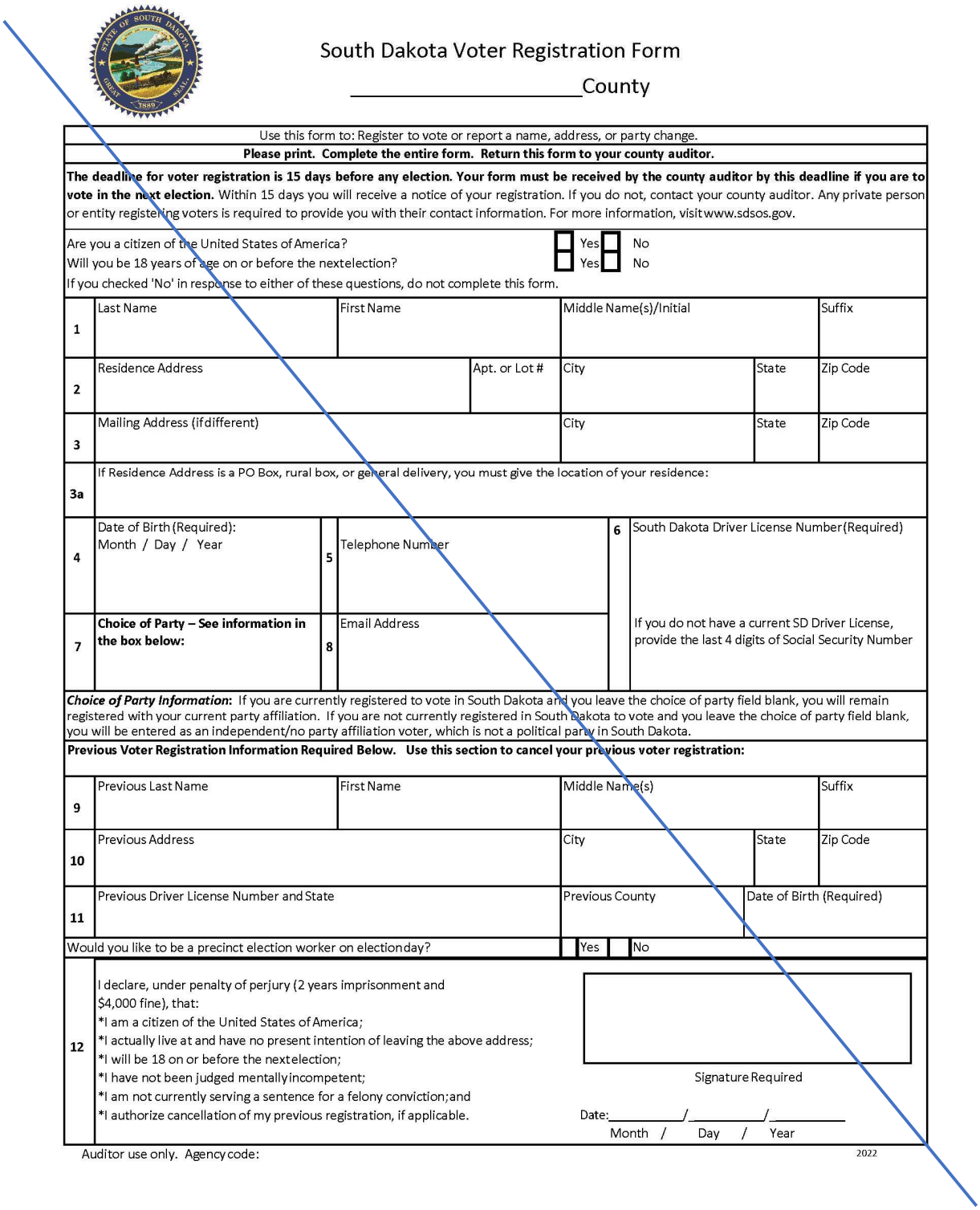
For Persons with Disabilities: This hearing will be located at a physically accessible place. Please contact the State Board of Elections at least 48 hours before the public hearing if you have special needs for which special arrangements can be made by calling (605)773-3537.

Copies of the proposed rules may be obtained without charge from:

State Board of Elections or rules.sd.gov or sdsos.gov
500 E. Capitol Avenue
elections@state.sd.us
(605)773-3537

Published at the approximate cost of $_____.

— **5:02:03:01. Voter registration** form**.** The voter registration form must be legibly printed. The voter registration form must be printed on ~~an~~ one or more pages that are ~~8.5~~eight-and-a-half inch wide by ~~11~~eleven inch tall paper, or a county may create a large print version of this form in the following format containing the following information:



South Dakota Voter Registration Form

_____County

Use this form to: Register to vote or report a name, address, or party change.

Please print. Complete the entire form. Return this form to your county auditor.

The deadline for voter registration is 15 days before any election. Your form must be received by the county auditor by this deadline if you are to vote in the next election. Within 15 days you will receive a notice of your registration. If you do not, contact your county auditor. Any private person or entity registering voters is required to provide you with their contact information. For more information, visit www.sdsos.gov.

Are you a citizen of the United States of America? ☐ Yes ☐ No

Will you be 18 years of age on or before the next election? ☐ Yes ☐ No

If you checked 'No' in response to either of these questions, do not complete this form.

1	Last Name	First Name	Middle Name(s)/Initial		Suffix
2	Residence Address	Apt. or Lot #	City	State	Zip Code
3	Mailing Address (if different)		City	State	Zip Code
3a	If Residence Address is a PO Box, rural box, or general delivery, you must give the location of your residence:				
4	Date of Birth (Required): Month / Day / Year	5 Telephone Number	6 South Dakota Driver License Number (Required)		
7	**Choice of Party – See information in the box below:**	8 Email Address	If you do not have a current SD Driver License, provide the last 4 digits of Social Security Number		

***Choice of Party Information*:** If you are currently registered to vote in South Dakota and you leave the choice of party field blank, you will remain registered with your current party affiliation. If you are not currently registered in South Dakota to vote and you leave the choice of party field blank, you will be entered as an independent/no party affiliation voter, which is not a political party in South Dakota.

Previous Voter Registration Information Required Below. Use this section to cancel your previous voter registration:

9	Previous Last Name	First Name	Middle Name(s)		Suffix
10	Previous Address		City	State	Zip Code
11	Previous Driver License Number and State		Previous County	Date of Birth (Required)	

Would you like to be a precinct election worker on election day? ☐ Yes ☐ No

12 I declare, under penalty of perjury (2 years imprisonment and $4,000 fine), that:
*I am a citizen of the United States of America;
*I actually live at and have no present intention of leaving the above address;
*I will be 18 on or before the next election;
*I have not been judged mentally incompetent;
*I am not currently serving a sentence for a felony conviction; and
*I authorize cancellation of my previous registration, if applicable.

Signature Required

Date: _____/_____/_____
Month / Day / Year

Auditor use only. Agency code:

2022

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_____County

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The deadline for voter registration is 15 days before any election. Your form must be received by the county auditor by this deadline if you are to vote in the next election. Within 15 days you will receive a notice of your registration. If you do not, contact your county auditor. Any private person or entity registering voters is required to provide you with their contact information. For more information, visit www.sdsos.gov.

1	Are you a citizen of the United States of America? ☐ Yes ☐ No Will you be 18 years of age on or before the next election? ☐ Yes ☐ No If you checked 'No' in response to either of these questions, do not complete this form.				
~~1~~ 2	Last Name	First Name	Middle Name(s)/Initial		Suffix
~~2~~ 3	Residence Address	Apt. or Lot #	City	State	Zip Code
~~3~~ 4	Mailing Address (if different)		City	State	Zip Code
~~3a~~ 4a	~~If Residence Address is a PO Box, rural box, or general delivery, you must give the location of your residence.~~ If you live in a rural area and do not have a street address; if your residence address is a PO Box, rural box, or general delivery; or if you have no address, please describe the physical location of your residence in writing in the space below, 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:				
~~4~~ 5	Date of Birth (Required): Month / Day / Year	~~5~~ 6	Telephone Number	~~6~~ 7	South Dakota Driver License Number (Required)
~~7~~ 8	**Choice of Party – See information in the box below:**	~~8~~ 9	Email Address		If you do not have a current SD Driver License, provide the last 4 digits of Social Security Number

Choice of Party Information: If you are currently registered to vote in South Dakota and you leave the choice of party field blank, you will remain registered with your current party affiliation. If you are not currently registered in South Dakota to vote and you leave the choice of party field blank, you will be entered as an independent/no party affiliation voter, which is not a political party in South Dakota.

Previous Voter Registration Information Required Below. Use this section to cancel your previous voter registration:

~~9~~ 10	Previous Last Name	First Name	Middle Name(s)		Suffix
~~10~~ 11	Previous Address		City	State	Zip Code
~~11~~ 12	Previous Driver License Number and State		Previous County	Date of Birth (Required)	
Would you like to be a precinct election worker on election day?			☐ Yes ☐ No		
~~12~~ 13	I declare, under penalty of perjury (2 years imprisonment and $4,000 fine), that: *I am a citizen of the United States of America; *I actually live at and have no present intention of leaving the above address; *I will be 18 on or before the next election; *I have not been judged mentally incompetent; *I am not currently serving a sentence for a felony conviction; and *I authorize cancellation of my previous registration, if applicable.		Signature Required Date: ____/____/____ Month / Day / Year		

Auditor use only. Agency code: 2022

Source: 2 SDR 5, effective July 30, 1975; 5 SDR 31, effective November 1, 1978; 6 SDR 25, effective September 24, 1979; 12 SDR 43, effective September 23, 1985; 14 SDR 19, effective August 9, 1987; 16 SDR 20, effective August 10, 1989; 19 SDR 12, effective August 5, 1992; 21 SDR 77, effective October 24, 1994; 22 SDR 95, effective January 18, 1996; 23 SDR 115, effective January 22, 1997; 25 SDR 167, effective July 6, 1999; 29 SDR 177, effective July 2, 2003; 30 SDR 171, effective May 10, 2004; 31 SDR 214, effective July 4, 2005; 32 SDR 225, effective July 3, 2006; 35 SDR 48, effective September 8, 2008; 39 SDR 123, effective January 16, 2013; 42 SDR 178, effective July 1, 2016; 46 SDR 42, effective September 30, 2019; 49 SDR 47, effective November 21, 2022.

General Authority: SDCL 12-1-9(1).

Law Implemented: SDCL 12-4-3, 12-4-5.4, 12-4-6, 12-4-8.