Directions
Your financial aid application cannot be processed because the Selective Service System could not confirm your Selective Service Registration. Processing of your financial aid application will continue after you complete the Registration Status and Certification sections on this form and return it, along with any required documentation, to the Office of Financial Aid at the address listed above. Contact Selective Service at 847-688-6888 or go to www.sss.gov for information.

Registration Status
Please check the statement that best describes your circumstance. Attach a copy of the documentation that supports the statement, where applicable:

☐ I am a female.
☐ I was born before January 1, 1960.
☐ I am currently on active duty in the U.S. Armed Forces (do not consider Guard or Reserves). (However, once you leave the Armed Forces, you must be registered to receive financial aid.)
☐ I am registered with Selective Service. Attach documentation of your registration status. For a duplicate, call 847-688-6888 or go to www.sss.gov.
☐ I am a citizen of the Republic of Palau, the Republic of the Marshall Islands, or the Federated States of Micronesia. However, a citizen or national of the Republic of the Marshall Islands or the Federated States of Micronesia who lives in the United States for more than one year for any reason except as a student or employee of the government of his homeland must register.
☐ I was a non-citizen who first entered the U.S. after I turned 26.
☐ I was a non-citizen who entered the U.S. as a lawful non-immigrant on a valid visa and remained in the U.S. on the terms of that visa until after I turned 26.
☐ I was unable to register due to hospitalization, incarceration or institutionalization.
☐ I was enrolled in an officer procurement program at The Citadel, North Georgia College and State University, Norwich University, Virginia Military Institute, Texas A&M University, or Virginia Polytechnic and State University.
☐ I am a commissioned Public Health Service officer on active duty or a member of the Reserve of the Public Health Service on specified active duty.
☐ I am not registered, but I have received a Status Letter from Selective Service stating that I was not required to register. Attach a copy of your status letter.

Last Name ______________ First Name ______________ HU ID ______________
Email Address ____________________________ Cell Phone Number ____________________________
Signature ____________________________ Date ____________________________

All documents must be TYPED!