

## SELECTIVE SERVICE REGISTRATION VERIFICATION

Last name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

Your financial aid application cannot be processed because your Selective Service registration could not be confirmed. In order to be considered for financial aid, you must submit documentation for proof of registration or a documented exemption and complete this form.

## Please check the statement below that best describes your circumstance and attach the requested supporting documentation:

- □ I was born before January 1, 1960 Attach documentation confirming your date of birth (state/federal ID or birth certificate)
- □ I am a veteran of active duty in the U.S. Armed Forces (National Guard or Reserves are not included) Attach DD-214 (To obtain copy, call the Veterans Administration at 1-800-827-1000)
- □ I am registered with Selective Service. Attach documentation of registration status. (To obtain verification of registration, go to Selective Service website at <u>www.sss.gov</u> or call 1-847-688-6888)
- I am female and not required to register. Attach copy of birth certificate.
- □ I am not required to register for Selective Service based on the fact that I entered the United States AFTER my 26<sup>th</sup> birthday. (Attach a copy of your date-stamped I-94 or I-551.)
- I am not registered, but have received a Status Information Letter from the Selective Service.
  (Attach a detailed explanation addressing why you did not register AND a copy of your Status Information Letter from Selective Service. To request a Status Letter, visit <u>www.sss.gov</u>.)

If none of the above statements accurately describes your circumstance, please contact Selective Service at <u>www.sss.gov</u> or 1-847-688-6888 to request a Status Information Letter that acknowledges the reason for your non-registration status. When you receive the Status Information Letter, please submit it with your supporting documentation and explanation to the Financial Aid Office.

By signing below, I acknowledge and confirm that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

Student Signature: \_\_\_\_\_

Date:	

It is the policy of Galveston College to provide equal opportunities without regard to age, race color, religion, national origin, gender, disability, genetic information, or veteran status.