



Office of Financial Aid Selective Service Appeal

STUDENT INFORMATION:

Last Name:	First Name, MI:	Student ID or *Social Security Number:
Cellular Telephone Number:	Home Telephone Number	Work Telephone Number
E-mail Address:	Date of Birth:	Semester Appeal for:

Step 1:

Please select the reason you did not register with Selective Service:

If you choose from this section provide documentation and go to step 4:

- I have attached a copy of my registration to this form.
- I served in the armed forces and attached a copy of my DD214.
- I was born before 1960.
- I was not 18 at the time that I completed my FAFSA application.

If you choose from this section, complete steps 2, 3 and 4:

- I entered the country after my 26th birthday.
My date of entry was: _____ My Date of Birth is: _____
(Provide documentation that confirms date of entry).
- I was incarcerated from my 18th birthday until the age of 26. (Provide proof of incarceration).
- I did not know that I needed register.
- Other. Please Explain: _____

Step 2:

Provide a detailed statement describing the circumstances that contributed to your failure to register with selective service as well as supporting documentation that would be pertinent for the committee to base their decision.

Step 3:

Go To www.sss.gov and download a request form for the status information letter. This form is completed and returned to the Selective Service **NOT** the school. The Selective Service will send a decision letter that needs to be submitted with the appeal.

Step 4:

Warning: If you purposely give false or misleading information on this form you may be fined, sentenced to jail or both.

Student Signature

Date