



# 2017-2018 Selective Service Compliance Form

This form may be submitted via email, mail, fax, or in person

Office of Financial Aid  
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## STUDENT INFORMATION

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
La Verne ID or SSN

## PROOF OF SELECTIVE SERVICE REGISTRATION OR EXEMPTION

**You are required to complete this form** because the Department of Education requires University of La Verne to confirm this information to complete your application for financial aid. All men who are United States citizens and non-citizens who reside in the United States, aged 18-25, are required to register with the Selective Service System. A man who resides in the U.S. as a lawful nonimmigrant is not required to register as long as he maintains a lawful visa status. Students who are required to register with Selective Service must do so to be eligible for federal financial aid funds. For more information visit the Selective Service website at [www.sss.gov](http://www.sss.gov). Check one of the boxes below to declare your Selective Service status:

- I have already registered with Selective Service. Attached is a copy of my Selective Service registration. (You can print out a copy of your registration at [www.sss.gov](http://www.sss.gov).)
- I am female and not required to register.
- I was under the age of 18 at the time of my FAFSA submission. Therefore I am exempt from registering with Selective Service at this time.
- I was born before 1960 and therefore I am exempt from registering with Selective Service.
- I am currently in the armed services and on active duty. Attached is proof of my armed service.
- I am a veteran. Attached is a copy of my DD-214, military ID or active duty orders.
- I am a non-citizen who first entered the U.S. after my 26<sup>th</sup> birthday. Attached as proof of my immigration date into the U.S. is a copy of the entry date stamp on the I-94 Form or from my passport, and/or a letter from the USCIS indicating the entry date.
- I am a non-citizen who entered the U.S. as a lawful non-immigrant on a valid visa and remained in the U.S. under the terms of that visa until after I turned 26 years old. Attached as proof, is a copy of my student visa form (I-20) or other valid U.S. passport visa stamp with expiration date (the dates must be from the time of U.S. entry until after you turned 26).
- I was not required to register prior to meeting one of the criteria below and met the criterion for the entire time through the age of 25 and therefore qualify for a waiver:
  - 1. I was unable to register due to being hospitalized, incarcerated, or institutionalized. Attach proof.
  - 2. 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; or I was a commissioned Public Health Service officer on active duty or a member of the Reserve of the Public Health Service on specified active duty. Attach proof.
- I failed to register with Selective Service and am over the age of 25. Attached is a personal signed statement explaining the reason I did not register with Selective Service. I have also requested a "Status Information" letter from Selective Service and have attached a copy of the letter or proof of the request. To obtain the "Status Information" letter please contact Selective Service at (847) 688-6888 or download the "Request for Status Information Letter" at [www.sss.gov](http://www.sss.gov). If proof of the request is submitted, the "Status Information" letter will be required at a later date.

## CERTIFICATION AND SIGNATURE

By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date