

Date Returned to Student

Selective Service Verification

UNIVERSITY of MAINE at AUGUSTA Student Financial Services 46 UNIVERSITY DRIVE, AUGUSTA, ME 04330-9488

207.621.3455 or 1.877.862.1234 Fax: 207.621.3384 or TTY: 1.800.316.3600 umafa@maine.edu

Date

According to the results of your Free Application for Federal Student Aid (FAFSA), your Selective Service registration or exemption status

	rmed by the Selective Service System. As a result, you must provide writte is before we can award you financial aid. Please read and complete the in	
Name		
Last	First	Middle Initial
Mailing Addr	ess	
Street/PO Box	City State	ZIP
Daytime Pho	one ID Number	
Phone Number	Student ID Number	
Check the Category	that best describes your situation and attach the required documentation to this comple	eted form.
Category (Check One)	Details	Action Required (attach documentation to this form)
А	I am exempt from registration with the Selective Service System because: (check one) I am female I have not reached my 18th birthday I was born before 19th	None required
	I am in the Armed Service on Active Duty (Does not apply to Reservist or National Guard members not on active duty)	Attach a copy of your active duty military I.D. to this form
	I am a resident of the Federated States of Micronesia or the Marshall Islands, or permanent resident of the Trust Territory of the Pacific Islands (Palau)	Attach proof of your residency
	I am a non-citizen who first entered the U.S. after I turned 26 years old I am a non-citizen who entered the U.S. as a lawful non-immigrant and remained in the U.S. under the terms of that visa until after age 26	Attach a copy of your I-94, I-551 or I-551C or a copy of your citizen certificate
	I am male, otherwise exempt	Attach a signed statement from you explaining your circumstances and proof of exemption, such as a birth certificate.
В	I am a male U. S. citizen or eligible non-citizen who is at least 18 but not yet 26 years of age You must be register with Selective Service	Attach a copy of your Registration Acknowledgement
С	I am a male U.S. citizen or eligible non-citizen , 26 years or older, who has never registered with Selective Service	You MUST attach a written advisory letter from the Selective Service (Call or write to: C/O Selective Service System, ADV, PO Box 4638, North Suburban, IL 60197-4638, (847) 688-6888 AND Attach a signed explanation from you explaining the circumstances
	Student Circeture	Data
Student Signature Date Office Use Only		
Complete:	Y / N Decision: Approved / Denied	

Reviewed by