Financial Aid Office
1801 East Cotati Avenue
Rohnert Park, CA 94928

www.sonoma.edu/finaid
Telephone: (707) 664-2389
Fax: (707) 664-4242

Print Form

2017-18 Selective Service Registration Verification Form

Student Name _____ SSU I.D. _____

At the time your financial aid application was processed, the Selective Service System (SSS) could not verify that you are either registered or exempt. Most men who reside in the U. S. (legally or illegally) between ages 18 and 25 are required to register with SSS. At age 26, a man cannot register.

Who Is Exempt from Registration?

- Females, or people who were born female
- Men born before 1960
- Men currently in the armed forces and on active duty
- Men residing in the U. S. as a ***lawful*** nonimmigrant
- Noncitizens who first entered the U. S. after age 25
- Other unusual categories listed on the SSS website at **www.sss.gov**

Men who are registered with SSS must provide proof of registration to the Financial Aid Office. If you do not have proof of your registration, contact SSS at www.sss.gov or call (847) 688-6888.

Men who are not exempt from registration and are under age 26 must register with SSS in order to receive federal and state financial aid. To register, contact SSS at www.sss.gov or call (847) 688-6888.

If you are a man who is age 26 or older and did not register with SSS, you must either document your exemption from the requirement or you must provide a written explanation of the reason(s) you did not register.

Instructions to Student: If you are female or were born female, check the box in Section A. Otherwise, check the appropriate box in Section B. Sign the certification at the bottom of this form, and return it to our office with documentation (if required).

Section A

☐ I am female or was born female; therefore, I am not required to register with Selective Service.

Section B

☐ I am registered with Selective Service **AND** proof of my registration is attached to this form.

☐ I cannot prove that I registered **OR** I never registered with Selective Service. (You will be contacted by your Financial Aid Representative regarding how to proceed.)

☐ I am exempt from registration with Selective Service for the following reason. (You will be contacted by your Financial Aid Representative regarding how to proceed.)

Exemption Reason: _____

Statement of Certification

I certify that the above information is true and complete.

Student Signature _____ Date _____ Phone number _____