

**STATEMENT OF REGISTRATION STATUS WITH SELECTIVE SERVICE**

NAME \_\_\_\_\_ SSN \_\_\_\_\_

Please Print

*Complete either Part A or Part B.*

**Part A. Exemption from Registration Requirement**

I certify that I am not required to be registered with the Selective Service because of one of the following reasons.

Check the appropriate blank.

\_\_\_\_\_ I am currently in the armed services and on active duty (this exception does not apply to members of the Reserve and National Guard who are not on active duty).

\_\_\_\_\_ I was not yet 18 years of age when I completed my Free Application for Federal Student Aid.

\_\_\_\_\_ I was born prior to 1960.

\_\_\_\_\_ I am a citizen of the Federated States of Micronesia, the Republic of the Marshall Islands, or the Republic of Palau.

\_\_\_\_\_ I am a non-citizen who first entered the U.S. after I became 26 years old.

\_\_\_\_\_ I am a non-citizen who first entered the U.S. as a lawful non-immigrant on a valid visa and remained in the U.S. on the terms of that visa until after I became 26 years old.

\_\_\_\_\_  
**Signature** **Date**

**Part B. Registration Information**

I understand I am required to be registered with the Selective Service and I have completed that requirement.

Check the appropriate blank.

\_\_\_\_\_ I completed a paper registration form and mailed it to Selective Service on \_\_\_\_\_.  
A copy of the registration form must be attached to this statement. **Date**

\_\_\_\_\_ I completed the registration "on-line" with Selective Service on \_\_\_\_\_.  
**Date**

\_\_\_\_\_  
**Signature** **Date**

**Return this form to the Office of Financial Aid, 119 Tillman Hall, Rock Hill, SC 29733.**