



Selective Service 2019-2020

Financial Aid Office
Phone: (208) 524-3000
Toll Free: 1-800-662-0261
Fax: (208) 525-7026
financial.aid@cei.edu
1600 S. 25th E. Idaho Falls, Idaho 83404

First Name	Last Name	Student ID	SSN	Phone Number

The Selective Service reported that you have not registered. In order to receive financial aid, you must be registered with the selective service if you are a male who is at least 18 years old and born after December 31, 1959.

If you are **not yet registered**, are male, and are 18 through 25 years of age, to receive financial aid you must do **one** of the following:

- 1) Make a correction to your FAFSA. Answer "Male" to (question 21) and "Register Me" to (question 22).
- 2) Complete a Selective Service Registration form at your local post office.
- 3) Register online at: www.sss.gov or call 1-847-688-6888

If you believe you have **already registered** please check the Selective Service website and **Provide Verification** by going online to www.sss.gov, click on Check Registration, and Verify Now. Print the confirmation page and return it with this form to the Financial Aid Office.

Exemptions: (1) Males 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); (2) Males who are not yet 18 at the time that they complete their applications (an update is not required during the year, even if a student turns 18 after completing application); (3) Males born before 1960; (4) Citizens of the Federated States of Micronesia, Republic of the Marshall Islands, or the Republic of Palau; (5) Non-citizens who first entered the U.S. after they turned 26; (6) Non-citizens who entered the U.S. as lawful non-immigrants on a valid visa and remained in the U.S. on the terms of that visa until after they turned 26.

Students who would have been required to register at 18 but were **unable to register** between the ages of 18-25 due to circumstances and who meet one of the following criteria for the ENTIRE TIME THROUGH THE AGE OF 25 qualify for a waiver if one of the following apply: (1) they are unable to register due to being hospitalized, incarcerated, or institutionalized; (2) they are enrolled in any officer procurement program or (3) they are commissioned Public Health Service officers on active duty or members of the Reserve of the Public Health Service on specified active duty. **If you believe that you are exempt from registration, please provide a signed statement indicating the reason(s). Attach the statement and documentation that supports your reason(s) to this form and return it to the Financial Aid Office.**

If you **failed to register** and do not have a reason that qualifies you as an exemption, you must provide a complete signed description as to why you failed to register. You must also provide documentation that corroborates this reason. In addition, you must request a **Status Information Letter** from *Selective Service*. **Attach the documents and return it to the Financial Aid Office.**

Certifications and Signatures

By signing this form I certify that all of the information reported is complete and all documents are true and accurate. I understand that I must provide verification of the statements I have made.

WARNING: If you purposely provide false or misleading information, you may be subject to a fine, imprisonment, or both.

Student Signature: _____ **Date:** _____

Office Use Only:	Financial Aid Office: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Comments:		
Processed By:		Date: