

FORM SELSRV - IDAHO STATE UNIVERSITY
SELECTIVE SERVICE CONFIRMATION FORM

21-22

SELSRV-22

The federal government requires colleges to check the accuracy of the information you provided on your Free Application for Federal Student Aid ([FAFSA](#)). This process is called verification. You must complete the verification process before the Office of Financial Aid can establish your eligibility for assistance. You must return the information requested on this form or you will not be considered for federal financial aid. Please return this completed form with applicable attachments to:

Office of Financial Aid, Idaho State University, Museum Building, Room 337
921 S 8th Ave, Stop 8077, Pocatello, ID 83209-8077
Phone: (208)282-2756 Fax: (208)282-4755 Email: financialaid@isu.edu
Scan and Upload: isu.edu/financialaid/upload

*Student Name: _____
(Use blue or black ink) Last First M.I.

*ISU ID: _____ *Last 4 Digits of Social Security #: _____
(Find under Academic Tools tab on [BengalWeb](#)) *Required

In order to receive federal student aid, you must be registered with Selective Service if you are a male who is at least 18 years old and born after December 31, 1959. Verification can be obtained online at www.sss.gov.

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 Republic of Palau, the Republic of the Marshall Islands, or the Federated States of Micronesia; (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 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 the waiver **IF:** (1) they are unable to register due to being hospitalized, incarcerated, or institutionalized; (2) they are enrolled in any 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 (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 Idaho State University Financial Aid Office (see above).**

If you failed to register and do not have a reason that qualifies you as an exemption, you must provide as complete a description as possible about your situation such as where you were living during the period when you should have registered, whether you were incarcerated or institutionalized and your citizenship status during the period, if applicable. You must also provide documentation that corroborates this reason. In addition, you must request a **Status Information Letter** from *Selective Service*. You may download this request from www.sss.gov. **Attach the signed description, documentation and Status Information Letter to this form and return it to the Idaho State University Financial Aid Office (see above).**

CERTIFICATION: The person signing below certifies that all of the information reported is complete and correct.

Student Signature: _____ Date: _____

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.