Selective Service Appeal

Student Name ___________________________________________ ASU ID ____________ Phone # ______________

All men who are at least 18 years of age and not currently on active duty with the U.S. Armed Forces, or who were born after December 31, 1959, must be registered with Selective Service. If you meet these qualifications and have not registered with Selective Service, you are not entitled to receive Title IV Federal Financial Aid until you register. If you are a male student who failed to register with Selective Service before your 26th birthday, you must:

- Provide documentation which clearly shows that you were exempt from Selective Service registration and
- Provide a detailed statement explaining your failure to register.

According to our records your Selective Service registration or exemption status was not confirmed by the Selective Service system. As a result you must provide written documentation as proof of your situation and take the appropriate action necessary.

Instructions
Review the following information, select the statement that correctly identifies your situation, and submit documentation as directed.

- I am on active duty in the Armed Services. (This does not apply to members of the Reserves and National Guard who are not on active duty.) Please attach a copy of your active duty military identification card.
- I have served as a member of one of the U.S. Armed Forces on active duty and received a DD-214 Form, and was released under a condition other than dishonorable. Please attach a copy of your DD-214 Form.
- I have not reached my 18th birthday.
- I was born before 1960.
- I am a citizen of the Republic of Palau, the Republic of the Marshall Islands, or the Federated States of Micronesia.
- I am a noncitizen who first entered the United States after I turned 26. Attach a copy of your I-94, I-551, or I551C, or other legal documentation of entrance to the U.S.
- I am a noncitizen who first entered the United States as a lawful nonimmigrant on a valid visa and remained in the U.S on the terms of that visa until after age 26. Attach a copy of your I-94, I-551, or I551C, or other legal documentation of entrance to the U.S.
- I am a U.S. Citizen who was required to register with Selective Service but failed to do so. Attach the following:
  1. A Status Information Letter from Selective Service http://www.sss.gov/instructions.html; and
  2. Proof that your non-registration was not knowing and willful by submitting additional documentation regarding the nature of, and reasons for, your failure to register. Provide a complete description about your situation, such as where you were living during the period when you should have registered, whether you were incarcerated or institutionalized, your citizenship status during the period, etc.

Student Certification
Read the following information carefully. Initial and sign below. Your initials and signature on the form certify that you have read and understand all the information.

<table>
<thead>
<tr>
<th>Initials</th>
<th>Statement</th>
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<tbody>
<tr>
<td></td>
<td>The Financial Aid Office will not accept or review an appeal that is incomplete or lacks appropriate documentation. I am submitting a complete appeal with all necessary documents attached.</td>
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<tr>
<td></td>
<td>I understand it is my responsibility to be aware of all ASU deadlines. I am responsible for paying my tuition in full and on time, regardless of financial aid or this appeal. Failure to pay my tuition and/or fees may result in additional fees as well as my classes being dropped. I am responsible for any late fees or charges I incur as a result of not paying my tuition in full or on time. I am also responsible for getting my classes reinstated.</td>
</tr>
<tr>
<td></td>
<td>I understand it is my responsibility to check my student account often to find the status of my appeal. I understand it is my responsibility to stay informed of the ASU Financial Aid policies and to monitor my own progress.</td>
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</tbody>
</table>

Student Name ___________________________________________ Date ________________

Office Use Only
☐ Approved    ☐ Denied  Initials:_______ Date:___________ ☐ RRAAREQ ☐ RHACOMM

Fax: 719.587.7366   Email: financialaid@adams.edu