2015-2016 Selective Service Registration Verification

Section A – Student Information (Please print clearly)

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Email</th>
</tr>
</thead>
</table>

| Street Address | City | State | Zip Code |

What you should do:
1. Complete this entire worksheet. You must answer all the questions and the form must be SIGNED.
2. Submit 8 ½ x 11 legible copies of documentation requested.
3. Please submit all documents at the same time to the address above (please do not fax, as it may delay processing).
4. Please make sure to include your UIN on all documents.

We are unable to process your UIS financial aid application until you either correct your Student Aid Report (SAR), or provide our office with a letter from Selective Service acknowledging your registration or exemption. If you failed to register with Selective Service prior to your 26th birthday, please provide our office with a written explanation and supporting documentation.

Section B – Selective Service Verification

Return this original form to our office along with a copy of the following requested documentation.

I have attached the following documentation (please check and submit one only):

- Copy of the letter from Selective Service acknowledging your registration or exemption.
- Typed and signed explanation, along with copies of supporting documentation that you failed to register with Selective Service prior to your 26th birthday. This must include a letter from Selective Service indicating your status.
- I am a female and not required to register with the Selective Service. Attached is documentation which states my gender (i.e. drivers license).

Section C – Student Signature

IMPORTANT: Return this original form to the Office of Financial Assistance. All documentation submitted with this form must:

1. Have legible copies made on 8 ½ x 11 paper.
2. Have UIN clearly printed within the boxes below.
3. Have all appropriate signatures.

I certify that the information provided on this form and any attachments are true and correct.

Student Signature ___________________________ Date __________

ENTER YOUR 9-DIGIT UIN: 1516 DRFT-E B