

## Mail or Fax:

Madonna University Financial Aid Office 36600 Schoolcraft Rd., Livonia, MI 48150

Fax: 734.432.5344

## Selective Service Registration Status 2019-2020

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law requires that before awarding Federal Student Aid, we confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, attach any required documents and submit to the Financial Aid Office within 30 days of this request. We may ask for additional information. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your financial aid will not be delayed. Your financial aid eligibility cannot be determined, and financial aid will not be awarded or disbursed, until the verification process is complete.

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address	(include apt. no.)		Student's Date of Birth
City	State	Zip Code	Student's Phone Number
registration period, you a registration or exemption		n until your 26 <sup>th</sup> birthday. rections below to resolve t	
☐ I certify that	am registered with Selecti	ve Service. I will submit	a copy of my selective service
registration o	· ·	to the Financial Aid Offi	a copy of my selective service ce with this form. I understand that if I

	I did not register for Selective Service because I came to the United States after my 26 <sup>th</sup> birthday. I will attach a signed statement noting my date of entry. Also, I will provide proof of my immigration date using my I-94 form or Passport (date stamped). If I am unable to provide either of these documents, I will provide a letter from the United States Citizenship and Immigration Services Office, as proof of my immigration date.				
	I was required to register with Selective Service before I reached the age of 26, but I did not. I will send in a copy of my Selective Service Status Information Letter with a signed statement explaining why I did not register. I will provide additional documentation to support my statement if needed.				
	I have not yet reached my 18 <sup>th</sup> birthday.				
	I am a female.				
	I was born before 1960.				
	I served on active duty in the United States Armed Forces. I will provide a copy of my DD214 along with this form to the Financial Aid Office.				
	I am an active duty member of the armed services. I will provide my military orders or a letter from my commanding officer as proof of this.				
If you have additional questions or concerns regarding your Selective Service registration status, please call 1-847-688-6888 or visit the following website, <a href="www.sss.gov">www.sss.gov</a> .  C. Certification and Signatures					
Each person signing this worksheet certifies that all of the Information reported on it is complete and correct.  The student and one parent whose information was			WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.		
	d on the FAFSA must sign and date.				
Student's Signature		Date			
Parent's S	Signature	Date			