



UNIVERSITY OF MARYLAND

OFFICE OF STUDENT FINANCIAL AID

9SELSERV

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2009-2010 Selective Service Registration Form

Student Name: _____ UID: _____

The Department of Education was unable to verify your Selective Service status, since all males between the ages of 18 – 25 are required to register with Selective Service in order to be eligible for Federal Student Aid Programs.

Please submit this form along with your Selective Service documentation to the Office of Student Financial Aid.

1. ___ Attached is documentation that certifies that I am registered with the Selective Service Administration.

Contact the Selective Service Administration at 847-688-6888 or visit their website at http://www.sss.gov/ to request documentation of your registration status. Please be sure to include your name, social security number, and date of birth on the documentation.

2. ___ I certify that I am not required to be registered with the Selective Service because:

- ___ I am in the armed services on active duty (Members of the Reserves or National Guard are not considered on active duty).
___ I have not reached my 18th birthday.
___ I am a permanent resident of the Trust Territory of the Pacific Islands.
___ I am a citizen of the Marshall Islands, the Federated States of Micronesia or the Republic of Palau.

3. If you are above the age of 26 and did not register with the Selective Service, you must submit this form along with a letter addressed to the Office of Student Financial Aid explaining the special circumstances that prevented you from registering. Please submit documentation of when you entered the United States of America and when you became a permanent resident. The Office of Student Financial Aid will review this information and determine your eligibility for Financial Aid.

I certify that the information listed above is correct and complete to the best of my knowledge.

Student's Signature: _____ Date: _____