

Kean University Office of Financial Aid 1000 Morris Avenue Union, NJ 07083

2017-2018 Selective Service Appeal Form

Student Name:	Kean ID #:
	8 and older, born after 1959, to be registered with the Selective lity. The Selective Service System could not confirm your egister after age 26.
Under certain conditions, the Selective waiver, please submit one of the follow	Service registration requirement can be <i>waived</i> . To request a ring:
• Proof of arrival in the U.S. after you date stamp of your first arrival in the	ar 26 th birthday, e.g., passport or I-94 with a USCIS (or INS) e U.S.
• Certificate of Release or Discharge Armed Forces (excluding Reserves	from Active Duty (Form DD-214) showing service in the U.S. and National Guard) before age 26.
	te or other document with assigned sex of female at birth. (codes E1-E8), stating that you were not required to register.
with the SSS was not knowing or willfuregistration requirement. You must first	documents but can demonstrate that your failure to register al, then you may appeal to this office for a waiver of the t request a Status Information Letter (SIL) from SSS at s-Information-Letter or by calling 1-888-655-1825. Upon
receipt of your SIL, submit all of the fo • A copy of the SIL.	llowing:
• A written statement, explaining why	y you did not register with the SSS before age 26. nent, e.g., entry into U.S., incarceration, or hospitalization.
For each attachment, pri	nt your name and Kean ID at the top of the page.
	your appeal and notify you of your eligibility for Federal ecision is final and cannot be appealed to the Selective Service eation.
I certify the attached information is true	e, correct, and complete.
Student Signature:	Date: