



## 2013-2014 SELECTIVE SERVICE REGISTRATION VERIFICATION FORM

## **STEP 1: STUDENT INFORMATION**

Please complete this verification form and provide copies of all requested paperwork within 15 days of receipt to Governors

| State U<br><b>award</b>    | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | nplete paper                    | work will not be acce    | pted, thereby (  | delaying the  | processing of your financial aid                                                                                    |
|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------|------------------|---------------|---------------------------------------------------------------------------------------------------------------------|
| Studen                     | t Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                          | GSU ID #         |               | Last 4 digits of SS#:                                                                                               |
| Pleas                      | se Print                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Last                            | First                    | uoo 12           |               | 2000 7 0.9000 07 00.11                                                                                              |
| Permai                     | nent Home Add                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ess:                            |                          |                  |               |                                                                                                                     |
|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Cit                             | у                        |                  | State         | Zip Code                                                                                                            |
| Studen                     | t's Date of Birth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | :                               | Home Pho                 | ne #:            |               | Cell #:                                                                                                             |
| Email A                    | Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | @student.govst.e         | edu              |               |                                                                                                                     |
| STEP :                     | 2: SELECTIVE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SERVICE VE                      | RIFICATION               |                  |               |                                                                                                                     |
| (FAFS <i>A</i><br>If you f | A) for 2013-14, (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | or provide our<br>with Selectiv | office with a letter fro | m Selective Serv | vice acknowle | e Application for Federal Student Aid edging your registration or exemption e our office with a written explanation |
| I have a                   | attached the foll                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | owing docum                     | entation (please check   | ):               |               |                                                                                                                     |
|                            | Copy of the letter from Selective Service acknowledging your registration or exemption.  I will not turn 18 until after the start of the 2013-2014 academic year (August 26, 2013). Attached is a copy of my birth certificate.  Typed an signed explanation along with copies of supporting documentation that you failed to register with Selective Service prior to your 26th birthday. <i>This must include a letter from Selective Service indicating your status.</i> I am a female and not required to register with the Selective Service. Attached is documentation which states my gender (i.e. drivers license). |                                 |                          |                  |               |                                                                                                                     |
|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                          |                  |               |                                                                                                                     |
| I certify                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ation reported                  |                          |                  |               | understand that any false statements of financial aid.                                                              |
| Studen                     | t's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | <br>Date                 |                  |               |                                                                                                                     |

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.