NORTHERN ILLINOIS UNIVERSITY GRADUATE SCHOOL

FEDERAL SELECTIVE-SERVICE REGISTRATION COMPLIANCE

State of Illinois law requires that a student receiving State-supported financial aid (e.g., a scholarship, fellowship, or tuition waiver) must present, to the university, certification of either (1) registration with the United States Selective Service or (2) an explanation of the absence of such registration.

Therefore, in order for a Northern Illinois University graduate student or student-at-large to receive such financial aid, the student <u>must</u> complete this form and return it to the Graduate School (Adams Hall).

You <u>must</u> mark statement A, B, or C:

- A. I certify that I am registered with the U.S. Selective Service.
- B. I certify that I am not required to be registered with the U.S. Selective Service. If statement B is marked, at least one of the following statements <u>must</u> also be marked:

I am a female.

I am not a U.S. citizen and I am lawfully in the U.S.

I have not reached my 18th birthday.

I was born before 1960.

I am on full-time active duty in the U.S. military. (This does <u>not</u> include being in the National Guard or military reserves.)

I am incarcerated, hospitalized, or institutionalized for medical reasons, but I understand that to receive financial aid after my release I must submit a new Federal Selective-Service Registration Compliance form.

I am a citizen of American Samoa and my permanent address is not in the U.S.

I am a national or citizen of the Republic of the Marshall Islands or the Federated States of Micronesia.

C. I am at least 26 years of age; but did not register with the U.S. Selective Service <u>and</u> am not exempt by statement B. I will not receive financial aid prior to a determination by the Graduate School that my failure to register was not knowing and willful. (This must be documented and is explained in an information sheet available at the Graduate School.)

Students Name (Print Last Name First)

Students Signature

Date

I agree to present a new copy of this form if the above information changes before I receive financial

Z ID Number