

# 2019-2020 Verification of Selective Service – Blue Ridge Community College

## Instructions:

Complete this form and submit it to the Financial Aid Office as soon as possible, so that your financial aid won't be delayed. The Financial Aid Office can assist you if you have questions. Start by carefully completing this form, then attach any requested items. Incomplete forms will be returned unprocessed. If you do not know your Student ID number, instructions for looking it up can be found here: [Find Your Student ID](#)

## Student Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## Students who have registered for Selective Service:

If you are registered for selective service, please visit [www.sss.gov/registration](http://www.sss.gov/registration) and print a copy of your registration verification to submit to the financial aid office.

## Students who have not registered for Selective Service:

Please check one of the following options and provide any applicable documentation:

I did not register for Selective Service because I entered the United States of America after the age of 26. I am able to supply documentation to support this. **\*\*If you did not enter in to the country until after your 26<sup>th</sup> birthday you must bring in proof of your birthday as well as the documentation showing when you entered in to the country for the office to make a copy and attach to this statement or you can contact selective service to get a letter stating you are not required to register. You must provide documentation to support this statement regardless of the reason.**

I did not register for Selective Service for another reason. **Please provide an explanation in the space below and attach relevant documentation. You may attach additional sheets if necessary.**

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## Signature:

By signing this worksheet, you certify that all the information is complete and correct. You must physically sign this form.

Student Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Please return this form by fax to 540-234-8189, scanned e-mail attachment to [finaid@brcc.edu](mailto:finaid@brcc.edu), or mail to Blue Ridge Community College, Office of Financial Aid, Box 80, One College Lane, Weyers Cave, VA 24486. Please call 855-844-3631 if you have questions