

Request for Status Information Letter

This is a fillable form. Please type in ALL CAPS before printing, or PRINT clearly using BLACK INK

Before you fill out and submit this form, please check to verify your registration status with the Selective Service System at <https://www.sss.gov>. If you cannot check or verify your registration online and you are not claiming an exemption, or if you have already received a Status Information Letter (SIL) from us in the past, please call (888) 655-1825.

Please check each item. You should only submit this form if the following are true:

- You have passed your 26th birthday
- You have verified that you are in fact "NOT REGISTERED"
- You were born after December 31, 1959
- You are claiming that you were exempt from the requirement to register
- You were born male or you are transgender (born female)
- You have not received a Status Information Letter from us in the past

YOU MUST PROVIDE AT LEAST ONE RESPONSE to each of the seven (7) Sections below. We cannot process your letter until we receive the required information and documents. Never send originals. KEEP A COPY of this form and any documents or correspondence you send to us.

SECTION 1 - GENERAL INFORMATION

Type or Print Clearly (ALL CAPS) – Must be Readable.

Full Legal Name: _____
First Name Middle Name Last Name(s)

List any other names used (Include multiple last names): _____

Social Security Number: _____ Date of Birth: _____
Month / Day / Year

Current Mailing Address: _____

City State Zip Code

Daytime Telephone Number: _____

Email Address: _____

What is your reason for this SIL?

Financial Aid Citizenship Employment Security Clearance Other _____

List each City & State (Country if overseas) where you lived between your 18th and 26th birthdays.
Use a separate sheet if needed:

SECTION 2 - MILITARY

If you served in the U.S. military, attach your proof of military service, such as a copy of your DD Form 214, NGB Form 22, DD Form 4 (if still on active duty), etc. If you attended a service academy or military school, provide a letter from the school or a transcript showing the dates.

To obtain proof of military service (DD Form 214, Official Military Personnel File), visit this website [Proof of military service \(DD Form 214, Official Military Personnel file\)](#).

Have you ever served in the U.S. military or attended a military service academy/school?

Yes (Please Continue) No (SKIP to Section 3)

US Army US Navy US Marine Corps US Air Force US Coast Guard

List dates of active duty service: _____ to _____

List dates of reserve duty service: _____ to _____

Did you attend a military service academy?

- The United States Military Academy (USMA)
 The United States Naval Academy (USNA)
 The United States Air Force Academy (USFA)
 The United States Coast Guard Academy (USCGA)

List dates of attendance: _____ to _____

Were you enrolled in an officer procurement program at a military school or university?

- The Citadel
 University of North Georgia
 Norwich University
 Virginia Military Institute
 Texas A&M
 University of Virginia Polytechnic and State University

List dates of attendance: _____ to _____

SECTION 3 - INCARCERATED / INSTITUTIONALIZED / HOSPITALIZED

Please attach proof if you were CONTINUOUSLY incarcerated, institutionalized, hospitalized, or home confined for the entire period from your 18th through 26th birthdays. If you were released, escaped, or otherwise out of custody for 30 days or more, you do not need to complete this form. Call us at (888) 655-1825.

Were you **CONTINUOUSLY** incarcerated, institutionalized, hospitalized, or home confined for the entire period of time between your 18th and 26th birthdays?

Yes (Please Continue) No (SKIP to Section 4)

Please indicate the type of confinement and provide start and release dates. (Attach separate sheet if necessary)

Institutionalized Incarcerated Hospitalized Home Confined

_____ to _____ _____ to _____ _____ to _____

_____ to _____ _____ to _____ _____ to _____

SECTION 4 - TRANSGENDER

The Military Selective Service Act, including the requirement to register, applies to all individuals who were designated male at birth. If you were born female and have transitioned to male, you must provide a copy of your female birth certificate (or medical documentation to show that a transition has taken place) and legal documentation to show any changes to your name.

My sex at birth was:

Male Female (I have or will transition to male)

into your country. If you remained in the US and requested a change of status, send a copy of the approved "Notice of Action" you received from USCIS.

You must include any times that you entered the United States illegally or without inspection, (no documentation is necessary). Likewise, you must list any times when you violated the terms of your visa, overstayed your visa, or for any other reason became an undocumented immigrant.

You should provide as much information as possible. We will use the information you send to determine your registration status. For a list of acceptable documents, please see our [List of acceptable documents](#).

Please list your immigration history showing all arrivals, departures and other changes in status, starting with the date of arrival that first put you in the United States between your 18th and 26th birthdays and continuing until you were past your 26th birthday. Use a separate sheet if necessary.

Arrival / Start Date	Good Until Date	Departure / End Date	USCIS Status

SECTION 6 - REASON FOR FAILURE TO REGISTER BEFORE AGE 26

Provide a written explanation for not registering with the Selective Service System. If you believe you did register, please provide a detailed explanation in the space provided below stating when, where, and how you registered. Include all addresses you may have used at that time.

SECTION 7 - YOUR SIGNATURE

Sign, date, and return this form to the address listed below with copies of ALL supporting documents showing proof of your claim. You may include any other supporting information you would like us to consider. **IMPORTANT:** Do not send original documents. The Selective Service System may not return original documents. You should retain a copy of all documents and correspondence submitted.

_____ Signature	_____ Month / Day / Year
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**Selective Service System
ATTN: SIL
PO Box 94638
Palatine, IL 60094-4638**

HELPFUL INFORMATION

- Please print this form. This form cannot be submitted online. Please type all requested information on the form before printing. ATTACH A COPY of all supporting documentation (**DO NOT submit originals**), and mail them to the address provided.
- This form is for use only by men born after December 31, 1959, who are not registered and are now 26 years and older or transgender who were born females.
- This form is not a registration form. Submitting this form will not register you with the Selective Service System.
- We will issue a Status Information Letter based on the information you provide. KEEP the original copy in your permanent files for future reference.
- If you are denied a right, benefit, or privilege because you are not registered, submit a copy of your Status Information Letter from the Selective Service System, and a separate letter in which you explain, to the best of your ability, the reasons for your failure to register to the agency administering the right, benefit, or privilege. That agency, NOT the Selective Service System, will make the final determination regarding your eligibility. The Selective Service System does not approve, disapprove, or make any recommendations to determine your eligibility for any right, benefit, or privilege you are seeking.
- Immigrant men over the age of 31 who are seeking naturalization and who did not register are no longer required to provide a “status information letter” or documentation of their status from the Selective Service System to USCIS. If asked for a status information letter, these men may print a form letter concerning their request for a letter for use with USCIS from <http://www.sss.gov>.