

**WORKFORCE INVESTMENT ACT
SELECTIVE SERVICE REGISTRATION WAIVER
FOR MALES BORN ON OR AFTER JANUARY 1, 1960 AND 26 OR OLDER
AND HAVE NOT REGISTERED**

Applicant's Name: _____ Date of Application: ____/____/____

Date of Birth: ____/____/____ Last four digits of SSN: _____

The above named applicant meets all other requirements and is eligible for the Workforce Investment Act program. Eligibility is based on the following selective service registration waiver.

- Section I** (Institutionalized for the entire period between the ages of 18 and 26.)
 - Release Papers (attach a copy of the document used to verify the information.)
 - Telephone Contact _____
 - Name of Institution _____
 - Date Entered Institution _____
 - Date released from Institution _____
 - Customer's Status Verified by: _____
 - Person Contacted _____
 - Job Title _____ Telephone No _____
- Received an honorable discharge from the military (attach a copy of the document (i.e. DD 214) used to verify the information).
- Has a visible or obvious handicap that would permanently disqualify him from military service. List handicap observed (for non-visible disability, attach documents).

- Entered U.S. at or after 26th birthday (attach a copy of immigration documentation (i.e. Form I-94 Arrival/Departure record, and Form I-551, Alien Registration Receipt Card) showing U.S. entry date).
- Not registered by age 26 and does not qualify for a waiver as stipulated above (requires CSSF approval, attach customer statement and a third party statement from family members, teachers, doctors, etc. as supporting documentation).

Section II

CERTIFICATION

I certify that the information provided above is true and that all documentation is, to the best of my knowledge, authentic.

Applicant Signature/Date

Career Advisor Signature/Date

Reviewer Signature/Date

Section IV

CSSF Approval

CSSF Reviewer Signature/ Date