



Office of the Registrar
Department of Enrollment Management

University Pavilion
University of Cincinnati
PO Box 210060
Cincinnati, OH 45221-0060

SELECTIVE SERVICE REGISTRATION STATEMENT

***THIS FORM MUST BE RETURNED
TO THE FOLLOWING ADDRESS OR EMAIL***

University of Cincinnati
Registrar/Selective Service
PO Box 210060
Cincinnati, OH 45221-0060

Send Electronically to email:
resid@ucmail.uc.edu

Name: _____ UC ID: _____ DOB: _____

I have registered and my Selective Service number is: _____

I am not required to register with the Selective Service and have checked the reason below:

_____ I am under the age of eighteen.

_____ I am over the age of twenty-six (Student should contact Selective Service.)

_____ I was born before 1960.

_____ I am on active duty with the armed forces of the United States excluding training in a reserve or National Guard unit.

_____ I am a non-immigrant alien lawfully in the United States in accordance with Section 101(A) (15) of the "Immigration and Nationality Act" U.S.C.

_____ I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands and I am not a citizen of the United States.

_____ I am a female.

_____ I became a permanent resident of the United States after the age of 26.

Signature

Date