

## **EMPLOY MILWAUKEE SELECTIVE SERVICE FORM**

Ap	plicant Name	Date of Birth	Gender at Birth ☐ Male ☐ Female
The	US requires nearly all individuals <u>born</u> male 18 to 25 years o	old to register for t	the Selective Service. To register or verify your registration, visit <a href="https://www.sss.gov">https://www.sss.gov</a> .
	I AM AN INDIVIDUAL BORN		REQUIREMENTS
	Female.	S	Selective Service registration not required.
	Male and age 18 or older who has registered with Selective Service.		My Selective Service Number is
	Male and under age 18.		must register within 30 days of my 18 <sup>th</sup> birthday. Failure to do so will end my services.
	Male and born before January 1, 1960.	S	Selective Service registration not required. I must provide documentation of my birthdate.
	Male and a US Citizen:  ☐ serving in the military on full-time active duty.  ☐ attending one of the five service academies.  ☐ with disabilities, under continual confinement.		selective Service registration not required. I must provide documentation to substantiate the situation selected.
	Male and a non-US Citizen on a valid, non-immigrant visa.		must provide verification of my valid, non-immigrant visa.
	Male and a non-US Citizen who came into this country for the first age 26.  Date of Entry into the US: Age on Date of Entry into the US:		must provide documentation that I was not living in the US from age 18 to age 26.
	Male and an unregistered veteran who was on active duty continuously from age 18 to 26.		must provide documentation of continuous active duty from age 18 to 26.
	Male and age 18 to 25 who has not registered with Selective Service.		must register with Selective Service before I can receive services.
	Male and age 26 or older who has not registered.		must request and receive a Selective Service waiver before I can receive services.
By signing below, I certify that the information provided on this form is true and  Applicant Signature Date Signed			ccurate to the best of my knowledge and belief.

Employ Milwaukee is an Equal Opportunity Employer and Service Provider. Auxiliary aids and services are available upon request to individuals with disabilities. If you need this information interpreted to a language you understand or in a different format, please contact Carrie Hersh, Equal Opportunity Officer, at 414-270-1726 or Carrie.Hersh@EmployMilwaukee.org. Callers who are deaf or hearing or speech-impaired may reach us at Wisconsin Relay Number 711.

IMPORTANT! This document contains important information in your rights, responsibilities and/or benefits. It is critical that you understand the information in this document, and we will provide the information in your preferred language at no cost to you. Call (414)-270-1726 for assistance in the translation and understanding of the information in this document.

IMPORTANTE! Este documento contiene información importante sobre sus derechos, responsabilidades y/o beneficios. Es importante que usted entienda la información en este documento. Nosotros le podemos ofrecer la información en el idioma de su preferencia sin costo alguno para usted. Llame al (414)-270-1726 para pedir asistencia en traducir y entender la información en este documento.

TSEEM CEEB! Daim ntawv no muaj ib cov lus tseem ceeb qhia paub txog koj cov cai, cov luag hauj lwm thiab/los yog cov kev pab. Nws yog ib qho tseem ceeb uas koj yuav tau to taub cov lus nyob hauv daim ntawv no, thiab peb yuav muab tau cov lus no txhais ua koj hom lus yam koj tsis tau them nyiaj dab tsi. Hu rau (414)-270-1726 yog xav tau kev pab kom muab cov lus nyob hauv daim ntawv no txhais rau koj kom koj to taub.

Form Date: 07.07.21

Page 1 of 1