



OFFICE USE ONLY	
Date Received _____	
Cert Completed _____	
<input type="checkbox"/> Main Campus	<input type="checkbox"/> Grad
<input type="checkbox"/> Communiversity	<input type="checkbox"/> DU/G
	<input type="checkbox"/> YRP _____

Request for Veteran Enrollment Certification

Name _____

GCU ID _____ Term _____

Phone Number _____ E-Mail _____

Mailing Address _____

Degree/Major _____ Is this a change in degree since your last certification? Yes No
If so, you must attach VA form 22-1995.

Check the VA Educational Benefit You Are Claiming:

- Chapter 30 (Montgomery GI Bill) Chapter 31 (Vocational Rehabilitation) Chapter 33 (Post-9/11 GI Bill)
 Chapter 35 (Survivor/Dependent DEA) Chapter 1606 (Reserve National Guard) Chapter 1607 (REAP)

Check If Any of the Following Apply:

- | | |
|---|--|
| <input type="checkbox"/> Are you currently on active duty or active orders? | <input type="checkbox"/> Is this your first enrollment for this chapter of VA benefits? (If so, attach your Certificate of Eligibility and Copy of Application for Benefits) |
| <input type="checkbox"/> Are you receiving any military TA, ROTC, or MyCAA funds for this term? | <input type="checkbox"/> Have you changed schools (transferred) since your last certification? (If so, attach VA form 22-1995) |
| <input type="checkbox"/> Have you separated since last term? (attach DD-214) | |
| <input type="checkbox"/> Are you eligible and applying for the Yellow Ribbon Program? | |
| <input type="checkbox"/> Will you be separating this term? ETS _____ | |
| <input type="checkbox"/> Are you concurrently enrolled at another school? Other school _____ | |
| If concurrent, GCU is your <input type="checkbox"/> Parent <input type="checkbox"/> Secondary | |

Registered Courses (e.g., History of Ireland HI354)	Credits	Required? (Yes or No)	Repeat? (Yes or No)	Campus/ Online
Name of Academic Advisor _____				

By signing this form, I affirm that the information I have provided is accurate, and I understand that:

- all of the above-listed courses are eligible for certification to the VA and are required for my degree program;
- it is my responsibility to notify the GCU VA coordinator of any changes to my registration (adds/drops), tuition, or fees;
- if I drop or fail a course, I may be required to repay the benefits I have received (including housing) for the course; and
- I am personally obligated to pay any debts to the university resulting from reductions or terminations of enrollment or veteran benefit eligibility regardless of original method of payment.

Student Signature _____ **Date** _____

We cannot accept this form without your signature, and you will not be certified for VA benefits without this form. It is your responsibility to submit and verify receipt of this form every semester or term for processing. You may print, sign, and e-mail this form, with all requested attachments, to financialaid@georgian.edu. You may also fax to, mail to, or drop it off at the Office of Financial Aid. You will receive an e-mail confirmation when your certification is sent to the VA.