

Veteran Intent to Enroll

Instructions: This form must be submitted by student after registration for EVERY semester term VA certification is requested through the Department of Veterans Affairs.

Section 1 Student Information

CBC ID _____ SSN _____-_____-_____

Student Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

Email _____

Section 2 Academic Information

____ Submit CBC degree signed by Faculty Advisor

____ Arrange to have Official Transcripts of all previous college credit forwarded to Veterans Office.

____ I have attended the following colleges _____

____ Have benefits been used at another school ____ Yes ____ No Where _____

Check Degree Seeking ____ AA ____ AS ____ AAS ____ CERT1 ____ CERT2

Major _____

At the following Campus ____ Beeville ____ Alice ____ Kingsville ____ Pleasanton

Change of Major ____ Yes ____ No If yes, please list _____

Semester requested for Certification ____ Fall ____ Spring ____ Summer 1 ____ Summer 2 Hours _____

Section 3 Benefits Information

____ Submit copy of DD214 Member 4 (Veteran Only)

____ Submit Letter Basic Eligibility or VA Form 2384-1/Notice of Basic Eligibility (NOBE)

Check any Financial Assistance ____ Grants ____ Scholarship ____ Other

Do you have a job/organization that pays for tuition and fees? ____ Yes ____ No

GI Bill Benefits Eligible for (please check to specify)

_____ Chapter 30-Montgomery GI Bill *Active Duty _____Yes _____No

_____ Chapter 31-Vocational Rehabilitation

_____ Chapter 33-Post 9/11 *Active Duty _____Yes _____No

_____ Chapter 35-Dependants Educational Assistance (DEA/VA Claim No. _____Veteran's SSN)

_____ Chapter 1606-Montgomery GI Bill-Selected Reserve

_____ Chapter 1607-MGIB-Reserve Educational Assistance Program (REAP) *does not pay tuition and fees

_____ Will you be using Hazlewood with any of the above chapters? (If yes, please attach Hazlewood Application)

PLEASE READ BEFORE SIGING: I certify that I am a current student that qualifies for the GI Bill and that I have time remaining of benefits to cover upcoming semester. I also certify that I am a student in good standing and that I am currently registered for the semester and hours above listed. I will notify the VA office immediately if I ADD or DROP a class.

Student Signature

Date

Please return this form to the Veteran Affairs Office.