



VETERANS OFFICE • VA INFORMATION FORM

REQUIRED TO BE COMPLETED BY ALL STUDENTS ELIGIBLE TO RECEIVE VA EDUCATIONAL BENEFITS

Applying for VA Benefits under:

- | | |
|--|--|
| <input type="checkbox"/> Montgomery GI Bill—
Selected Reserves, REAP/Ch. 1606, 1607 | <input type="checkbox"/> Montgomery GI Bill/ Ch. 30 |
| <input type="checkbox"/> VA Vocational Rehab/Ch. 31 | <input type="checkbox"/> POST 9/11/Ch. 33 |
| <input type="checkbox"/> Dependent/Spouse of Disabled Veterans/Ch. 35 | <input type="checkbox"/> Veterans Opportunity to Work (VRAP) |

First Name	MI	Last Name	Phone
Campus		EMAIL	

Degree Presently working on _____
Major

Indicate the terms and hours you are enrolling

Fall _____ Hours _____	Spring _____ Hours _____	
Summer I _____ Hours _____	Summer II _____ Hours _____	Summer III _____ Hours _____

To be entitled to VA Benefits you must be satisfactory pursuing your program of study or training and must be making satisfactory progress toward completion of your educational or vocational goal as stated on your latest application with the Veterans Administration. All suspensions must be reported to VA Certifying Official!

“I understand that any changes in educational status (i.e. , a drop in credit hours, change of program or major, grade changes, withdrawal from school, or retroactive withdrawals, or grade changes) may cause overpayments that will be due from the veteran. I understand that any changes of address must be reported to New River’s Veterans Certifying Official within (7) days of the change. Failure to report changes could jeopardize future enrollment certifications. I understand that I am NOT eligible for any payments under any VA programs for credit hours not required for my degree.”

Date	Signature (DO NOT PRINT)	Student ID Number
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