

J# _____ (FOR OFFICE USE ONLY)

JEFFERSON COMMUNITY COLLEGE
Application for VA Enrollment Certification

Name: _____ Social Security Number: _____

Address: _____

Phone number: _____ Date of Birth: _____

Email address: _____

County of Residence: _____

Benefit you intend to use (check one):

- Montgomery GI Bill-Post 9/11 (Chapter 33) Montgomery GI Bill-Post 9/11 TEB (Chapter 33)
- Montgomery GI Bill-Active Duty (Chapter 30) Dependent of: Active Duty Veteran
- Montgomery GI Bill--Reserves (Chapter 1606) Dependents Educ. Asst. Program (Chapter 35)
- Veterans Vocational Rehabilitation (Chapter 31) Spouse Child
- Fry Scholarship (Chapter 35)

Chapter 35 students ONLY Sponsor's Social Security Number: _____ **Suffix** _____

Have you used your VA Education Benefits, prior to this academic term? Yes No N/A
If yes, indicate where you have used your VA Education Benefits _____

Will you be separated from Active Duty by the time the term starts? Yes No N/A
If not, the date you expect to be discharged is _____

Have you requested your Joint Service Transcript (JST) be sent to JCC? Yes No N/A

Indicate your educational goal at JCC:

- Obtain Associates Degree or Certificate from JCC in: _____
- Complete pre-requisite courses for admission into another institution or program
- Guest student earning degree at: _____

Indicate preferred starting semester: Fall Winter Spring Summer

*** When filling out your VA application have your bank account information and routing number on hand. The VA only allows direct deposit payments.**

****Ensure you read, initial, and sign the Statement of Understanding on the back page to activate your GI Bill benefits at JCC**

Statement of Understanding

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1. I understand that if I do **NOT** want to be certified with the VA, I must notify Veteran Services in writing prior to registering for classes. (We have a simple form for this in our office.) _____ Initial
2. I am responsible for information forwarded by the College through Cannon mail (JCC student email). It **is** expected that I will check my Cannon mail account regularly. _____ Initial
3. I **will provide** all required documentation to include: Certificate of Eligibility, VA application, DD 214 Member copy 4, NOBE, Transfer Approval Letter as required, and Overpayment Letters as they occur, as well as Parent letter (if required). _____ Initial
4. I **will notify** Veteran Services if there is any change to my contact information. _____ Initial
5. I **will notify** Veteran Services if I make any schedule and/or program changes. _____ Initial
6. I **will notify** Veteran Services if I stop attending class(es). _____ Initial
7. I understand that **any** schedule/degree program changes will result in changes with the VA and **could** affect my VA education payments. _____ Initial
8. I **will notify** Veteran Services if there is a change in military status. _____ Initial
9. I understand that I **may not** receive my book stipend prior to the start of my term. It is my responsibility to purchase books out of pocket or have financial aid in place to cover the cost. _____ Initial
10. I understand that if I fail to comply with the above, it could result in an over/under payment of benefits. The VA **will** hold me responsible for overpayment of my education benefits. _____ Initial
11. I understand that only one degree program can be certified with the VA at a time and if I am dual degreed some of my classes **may not** be eligible to be certified with the VA which could result in a school debt. _____ Initial
12. Any class that does not fit into my degree program **will not** be certified with the VA unless it is a pre-requisite, or you obtain a graduation waiver. _____ Initial
13. I understand that for the VA to cover any remedial class starting with "0" (such as ENG 099, MTH 094, MTH 095, MTH 098), it **must** be taken in residence and **not** online or hybrid. _____ Initial
14. I understand that due to the College having many different parts of term within each semester, I **may not** receive full benefits with the VA even if I am full time with the College. To mitigate this, I will contact Veteran Service to ensure I am receiving my maximum benefit. It is my responsibility to make sure I am in the proper classes. The School Certifying Official and the Veteran Services Coordinator will gladly assist you in modifying your schedule. _____ Initial
15. **Many classes have online books with the charge automatically applied to your bill. It will be called "books included" and it is your responsibility to pay for them. If you prefer to not use "books included", you MUST opt out of it at the bookstore, by the second week of the semester. You then have to purchase the book out of pocket and the cost could be higher.** _____ Initial

Signature: _____ Date: _____ Staff initials & date: _____