FREED HARDEMAN UNIVERSITY

Veteran's Worksheet

Name_____ C#_____

Social Security Number _____

E-mail address _____

VA Program you are eligible for:

- ❑ (Chp 33) Post 9/11 _____Yellow Ribbon
- ❑ (Chp 30) Montgomery (Active Duty) G.I. Bill
- ❑ (Chp 35) Dependent of Veteran

- ❑ (Chp 32) VEAP VA Claim #_____
- ❑ (Chp 31) VA Voc Rehab
- ❑ (Chp 1606) Montgomery (Reserve/National Guard) G.I. Bill
  Please circle whether you are: **GUARD** or **RESERVE**
  and the location of your drilling unit: _____
- ❑ (Chp 1607) Deployed guard/reserve benefit:
  Please circle whether you are: **GUARD** or **RESERVE**
  and the location of your drilling unit: _____

Address (you want VA to have) _____

City _____ State_____ Zip Code_____

1. Degree (or certificate) objective _____Major_____

   Please note: The DVA will only pay you for courses usable toward a degree program. It is important that you keep your current major on record with the University in case inquiries arise in regard tot he validity of what you are enrolled in. If you are not yet admitted to a degree program there is some danger that you will not receive G.I. BILL. If this situation describes your situation, please explain on the backof this worksheet so we can advise you accordingly.
2. Expected date of graduation (month/year) _____
3. Where did you last receive VA benefits? ❑ Here ❑ Other School ❑ New
4. Number of hours of registration for Summer:_____
5. Number of hours of registration for Fall: _____

6. Number of hours of registration for Spring: _____
7. Are you repeating any courses? ❑ Yes ❑ No
   Which ones? _____
   _____
   _____
   _____ DVA will not pay you for retaking courses you have previously passed.

For all semesters: Changes in course enrollment after the last day to drop and add courses may result in the retroactive loss of benefits unless the VA finds mitigating circumstances involved in the change. Loss of benefits could refer back to the first day of class. Courses added during ther drop/add period are considered by the VA to begin on the day the course was added, not the first day of the session (as a resultt, the first VA check for the session may be less than the full amount expected).

I am aware that changes in my registration may alter the apyemnt the VA will award me.

I understand that I will be liable for any overpayment which I might receive from the Veterans Administration. List above are all the course I am repeating (#7).

I am also aware that I must check in each session after registering for classes to insure my plans are up to date.

I hereby certify that all statements are true and complete to the best of my knowledge and belief.

I request GI Bill payment for the program I have listed in question #1 Today's Date

_____ _____