Print and submit this form to gross1@mctc.edu along with copy of registration form or fax to 304-525-1467.

Submittal of this form must be from your SCHOOL EMAIL ACCOUNT

If you have not applied for your education benefits please schedule an appointment with the Certifying Official at gross1@mctc.edu.

VA CERTIFICATION REQUEST

PLEASE PRINT

STUDENT NUMBER_

SOCIAL SECURITY NUMBER (if first time request)________________________________VA CLAIM NUMBER (CH35 only/if first time request)________

CHAPTER NO.	o 30 Montgome	ery GIBILL	o 31 VOCREHAB	o33 POST 9/11 GIBILL	o 35 Dependent	o 1606 (Guard/R	eserve never deployed)	o 1607 (09/11/01 Guard/Reserve deployed)
Certificate of Eli	gibility (COE) on Fil	le with Schoo	ol Certifying Official for the	e above listed benefitYES	NO (if no, please bring	a copy of the COE in for yo	our records)	
NAME				Mid	TELEPHON	E NUMBER:	Email:	
Last			First	Mid	dle			
PERMANENT A	DDRESS (if address	s has change	d since last request, have	you updated your address with the	Department of Vet Affairs and	d MCTC Yes No)		
Street				City	St	ate Z	ip	
TYPE OF DEGR	EE WORKING TOW	/ARD o Ass	sociate o On-the-job-tra	ining (OJT) o Degree Certificate	Program/Major			
					C	hanges in Program/M	ajor must be reported a	and approved by the VA
Is this your firs	request at MCTC c	laiming VA E	ducational Benefits?	o No o Yes (if yes	please schedule an app	pointment with the Cer	tifying Official at gross	1@mctc.edu)
SEMESTER(s) I	REGISTERED FOR:	o Fall	o Spring	o Summer A	o Summer B	o Summer C	Total Hours Register	ed For:
	<u>By :</u>	<u>submit</u>	ting this forn	n, I verify that the o	courses I am re	egistered for a	nre required for	r my degree.
			<u>PLEAS</u>	E READ THE IMPORTAN	NT INFORMATION E	<u>BELOW BEFORE S</u>	<u>UBMITTING</u>	
degree progr of the chang	rams, or unnece e. Failure to repo	ssary repe ort change	eats. You must report es will result in overp	any changes in your educat ayment of benefits and the c	ional status (i.e., drop i reation a debt to the go	n credit hours or char vernment. Veterans a	iges in courses taken) f nd dependents will be r	courses not required for admittance to to the Military Programs Office on the day responsible for repaying all of the event as required by law.
Ci	A <i>UTION:</i> A vet	teran/stud	lent who willfully s	ubmits a false report to ob	tain benefits under th	nis law may be prose	ecuted, resulting in fi	ne, or imprisonment or both.
			Signature:					