



Veteran Benefits Request Form

Section 1: Student Information

Name _____ Student ID/StarID: _____

Program of Study: _____

Semester: _____ Year: _____

Registered Courses:

Veteran Advisor Signature _____ Date _____

Section 2: Benefits Program

Type of Benefit: *(check one)*

- Chapter 30 Montgomery GI Bill ***(FIRST SEMESTER: Please turn in COE to School Certifying Official)***
- Chapter 31 Voc Rehab ***(Please submit VA Form 28-1905M to School Certifying Official)***
- Chapter 33 Post 9/11 ***(FIRST SEMESTER: Please turn in COE to School Certifying Official)***
- Chapter 33 Post 9/11 & Federal Tuition Assistance (FTA)
- Minnesota GI Bill ***(Please complete separate MN GI Bill and FAFSA applications online)***
- Chapter 1606 Selected Reserve/Guard
- Chapter 1607 Selected Reserve/Guard Deployed
- Federal Tuition Assistance (FTA) ***(Please turn in FTA approval to School Certifying Official)***
- Chapter 35 Dependent Benefit ***(please confirm Veteran's SSN with School Certifying Official)***
- I plan on taking classes at another school this semester and want to use my benefits. If so, please indicate school so a parent letter can be sent on your behalf. _____

I understand that it is my responsibility to familiarize myself with VA regulations concerning VA education benefits. I certify that all courses are applicable to my degree program and meet VA requirements. I further agree to promptly notify North Hennepin Community College's School Certifying Official of any change in my hours or program. Attached is a copy of my registration for the School Certifying Official to submit to the VA for my educational benefits.

Signature _____ Date _____

Section 3: Responsibilities of Students Receiving Veterans Education Benefits

NEW STUDENTS ONLY -- Please initial after reading each item.

CURRENT STUDENTS – Please review these guidelines & sign below.

- I understand that I can only receive benefits for courses that apply to my degree program. _____
- I understand that if I change my degree program I am required to notify the School Certifying Official _____
- I understand that I must report any changes or withdrawals immediately to the School Certifying Official _____
- I understand that **if I am using Federal Tuition Assistance** I need to submit a copy of the approval to the Veteran Services Office _____
- I understand that **if I am using Post 9/11 GI Bill and Federal Tuition Assistance** I need to notify the School Certifying Official _____
- I understand that if I receive an overpayment of VA benefits, this money will have to be returned to the VA by the student and failure to make payment arrangements to the VA will result in future benefits or tax refunds being withheld _____
- I understand that the VA will **not** pay for any **ONLINE or BLENDED/HYBRID** remedial course (courses under 1000 level) _____
- I understand that the VA considers online classes as blended/hybrid, distance learning, or independent study _____
- I understand that students who use the Post 9/11 GI Bill and take **only** online classes will receive ½ the national average of BAH _____
- I understand that taking accelerated classes may affect my veterans benefits _____
- I understand that the VA pays BAH according to the number of credits and time in class (rate of pursuit) _____
- I understand that the VA will not pay for a repeat course in which a passing grade has been received _____
- I understand that during my last semester of school, I can take non-required courses in order to make my schedule full-time to receive full-time pay (excludes Chapter 31 Vocational Rehabilitation) _____
- I understand that I must meet with the Veterans Academic Advisor each semester prior to registration _____

Student Signature _____ Date _____

Updated 10/2015