Please read each statement below carefully and check the appropriate box as it pertains to you.

- This is my first semester at Millersville University
- I am a transfer student, and the last school that I received VA benefits at was: ____________________________
- I am a returning student and have received VA benefits at Millersville University in previous semesters
- I am a visiting student and will submit a Permission to Study/Parent Letter from my home school’s VA Office

What is your current degree program?
- [ ] Associate’s Degree
- [ ] Bachelor’s Degree
- [ ] Master’s Degree
- [ ] Post-Baccalaureate Certification
- [ ] Doctoral Degree

What is your current major? Is this a change of major?  
___________________________  Yes  [ ]  No

Do you intend to use Federal Tuition Assistance (FTA)?
- [ ] Yes  [ ] No

Applying for VA benefits is a one-time application (unless changing programs). If you have already completed your application with the VA, please check the appropriate box below and submit any required documentation.

**If you have not yet applied for benefits, do not submit this application until you complete your online application with the VA. To apply for benefits online, please go to: [https://www.va.gov/education/how-to-apply/](https://www.va.gov/education/how-to-apply/)**

- [ ] I am receiving benefits for the first time and I will provide the Office of Financial Aid with a copy of the required documentation: **Documentation Required:**
  - Copy of Certificate of Eligibility (COE) or Award Letter that was mailed to your home address from the VA – additional copies can be obtained online at [https://www.va.gov/](https://www.va.gov/)

- [ ] I have received benefits in the past and previously submitted all the requested documentation to Millersville. I do not need to provide anything further to the Office of Financial Aid unless requested by the VA Certifying Official.
BENEFIT PROGRAM INFORMATION

Please check the appropriate box to indicate the type of VA benefit you plan to receive and make sure to fill in any blanks. If information is not complete, the form will be returned to you.

☐ Chapter 31 – Vocational Rehabilitation:
  - Your Vocational Rehabilitation Counselor must submit a current 28-1905 form to the Office of Financial Aid before the VA Certifying Official will submit a certification on your behalf. If form 28-1905 is not received, your enrollment certification will not be submitted.
  - If we have received your 28-1905 form and your enrollment certification is submitted, funds will be paid directly to Millersville University to cover Tuition and Fees.
  - If you are eligible to receive a housing allowance, those funds will be paid directly to you.

☐ Chapter 30 – Montgomery GI Bill - Active Duty:
  - Funds are paid directly to the student and the student is responsible to pay any outstanding bill with the Office of Student Accounts (OSA) by the semester’s bill due date.

☐ Chapter 33 – Post 9/11 GI Bill: ________ % Eligibility
  - Funds are paid directly to Millersville University to cover Tuition and Fees
  - If you are eligible to receive a Basic Allowance for Housing (BAH), those funds will be paid directly to you.
  - If your eligibility is not 100%, you must pay the difference by the semester’s bill due date.

☐ Chapter 33 – Post 9/11 GI Bill – transferred to Spouse or Dependent(s): ________ % Eligibility
  - Funds are paid directly to Millersville University to cover Tuition and Fees
  - If you are eligible to receive a Basic Housing Allowance (BHA), those funds will be paid directly to you.
  - If your eligibility is not 100%, you must pay the difference by the semester’s bill due date.

☐ Chapter 35 – Dependent / Spouse: ________ - ________ File # / Sponsor’s SSN
  - Funds are paid directly to the student and the student is responsible to pay any outstanding bill with the Office of Student Accounts (OSA) by the semester’s bill due date.

☐ Chapter 1606 – Montgomery GI Bill - Selected Reserve:
  - Funds are paid directly to the student and the student is responsible to pay any outstanding bill with the Office of Student Accounts (OSA) by the semester’s bill due date.

ENROLLMENT INFORMATION

In the box below, please indicate the total number of credits you plan to take in the classroom and/or the total number of credits that will be online or blended.

<table>
<thead>
<tr>
<th>Semester</th>
<th># of Credits – in the Classroom</th>
<th># of Credits - Online</th>
<th>Total # of Credits Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td>FALL</td>
<td>____________________________</td>
<td>______________________</td>
<td>____________________________</td>
</tr>
</tbody>
</table>
Please initial next to each statement indicating that you have read and understand the following:

_____ I must be registered for classes prior to submitting this form.

_____ I must complete this form each semester to have an enrollment certification submitted on my behalf.

_____ I understand that classes which are successfully completed, as determined by my Degree Audit Report (DARS), may not be certified again for VA purposes.

_____ I understand that I must notify the VA Certifying Official of any changes made to my class schedule (such as the add/drop of classes and/or program change). Failure to notify the certifying official by submitting a new VA enrollment form, may result in owing the VA for an overpayment.

_____ I understand the school automatically notifies the VA of any changes including statuses of academic probation and suspension. If I receive a 'W' (Withdrawal) grade during the semester it is required to be reported to the VA; which may result in me owing VA for tuition, fees and Basic Allowance for Housing (BAH).

_____ I understand I cannot be certified beyond my sophomore year unless a major is declared.

_____ I understand that I am responsible for all debts resulting from reductions or terminations of my enrollment even if the payment was submitted directly to the college on my behalf.

_____ I understand that Millersville University may not be made aware that I am nearing or have exhausted my benefits. I am aware that if the VA Certifying Official is notified after benefits have been applied to my account, that some or all of my benefits may have to be retroactively adjusted; which may result in a balance due to the university.

Please make sure you have initialed each statement above - do not use check marks. If any statement above is not initialed, the form will be returned to you for completion.

REQUIRED SIGNATURES

By signing this worksheet, I certify that all the information reported on it is complete and correct.

STUDENT SIGNATURE ___________________________ DATE: ___________________________