

VA ENROLLMENT CERTIFICATION REQUEST

SPRING SEMESTER ONLY

STUDENT NAME

MILLERSVILLE ID NUMBER

STREET ADDRESS (APT #)

CITY, STATE, ZIP

CONTACT PHONE NUMBER

MILLERSVILLE EMAIL ADDRESS

APPLICATION INFORMATION

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

- I have NOT applied to use VA Benefits and do NOT have a Certificate of Eligibility (COE).**
Please visit VA.gov/education to apply to use your VA benefits. **Please do not submit this form until you have your COE.**
- I have applied for benefits but have not submitted my Certificate of Eligibility (COE) or Statement of Benefits to Millersville.**
Please submit a copy of your Certificate of Eligibility (COE) with this document.
- I already submitted my Certificate of Eligibility (COE) or Statement of Benefits.**
You do not need to provide anything further to the Office of Financial Aid unless requested by the VA Certifying Official.

STUDENT INFORMATION

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

What is your current major? _____

Is this a change of major since you last completed a VA Enrollment Request?

- Yes
- No

Are you active military and intend on using Tuition Assistance through your branch of service?

- Yes
- No

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 – Veteran Readiness and Employment (formerly Vocational Rehabilitation):**
- Your VR&E Counselor **must** submit a current 28-1905 form to the Office of Financial Aid before the VA Certifying certification on your behalf.
 - 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 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.
 - **Starting December 17, 2021, all Chapter 33 recipients must verify their enrollment each month by text message or phone to 1-888-GIBILL-1 (1-888-442-4551).**
- Chapter 33 – Transferred Post 9/11 GI Bill 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.
 - **Starting December 17, 2021, all Chapter 33 recipients must verify their enrollment each month by text message or phone to 1-888-GIBILL-1 (1-888-442-4551).**
- 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 this term.

Please indicate the term for this certification request:

Total # of Credits
<div style="border-bottom: 1px solid black; width: 80%; margin: 0 auto;"></div>

STATEMENT OF UNDERSTANDING

Please initial next to each statement indicating that you have read and understand the following:

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

_____ Initial: I **must complete this form every semester to have an enrollment certification submitted on my behalf.**

_____ Initial: I understand that only courses listed as required on my Degree Audit can be certified with the VA. I am also aware that classes which are successfully completed, as determined by my Degree Audit Report (DARS), may not be certified again for VA purposes.

_____ Initial: 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 VA Certifying Official of changes to my class schedule may result in owing the VA for an overpayment.

_____ Initial: I understand the school automatically notifies the VA of any changes including statuses of academic probation and suspension. Students who receive all (or a combination of) F, Z, and/or W grades will be reported to the VA with a last day of attendance provided by the Registrar's Office, which may result in me owing VA for tuition, fees and *Basic Allowance for Housing (BAH)*.

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

_____ Initial: 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.

_____ **Initial: I understand that I must verify my enrollment with the VA every month in order to receive my benefits under Chapter 30 or Chapter 1606, by either visiting the VA website at <https://www.gibill.va.gov/wave>. If I receive Chapter 33 benefits, I will verify my enrollment by text message or phone call to 1-888-GIBILL-1 (1-888-442-4551).**

_____ Initial: 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, 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.

Benefits cannot be processed unless you have initialed and signed this form.
If you have not submitted your Certificate of Eligibility, this form cannot be processed.

STUDENT SIGNATURE

DATE