

CERTIFICATION REQUEST: VA EDUCATIONAL BENEFITS

FALL 2006 / SPRING 2007

Office of Veterans Programs
 The Pennsylvania State University
 325 Boucke Building
 University Park, PA 16802-5901

http://www.equity.psu.edu/veterans/
 Office: (814) 863-0465
 FAX: (814) 865-3815

NAME: _____

EMERGENCY PHONE: _____

EMAIL ADDRESS: _____

LOCAL PHONE: _____

MAILING ADDRESS (for letters, forms and checks from the VA):

LOCAL ADDRESS (While Enrolled):

NOTE: If you are planning to move, please notify our office immediately -- Especially if the address change will affect receipt of your VA Educational Benefits.

COLLEGE or MAJOR (Engineering, Liberal Arts, Mechanical Engineering, Crime, Law, and Justice, IST, DUS, etc.)	<u>CURRENT DEGREE PROGRAM</u>	<u>VA EDUCATIONAL BENEFITS</u>
	Associate <input type="radio"/> Bachelors <input type="radio"/> Masters <input type="radio"/> Doctoral <input type="radio"/>	Montgomery GI Bill: Active Duty (Chapter 30) <input type="radio"/> Selected Reserves (Chapter 1606) <input type="radio"/> REAP/Reserve Educational Assistance Program (Chapter 1607) <input type="radio"/> VEAP/Contributory (Chapter 32) <input type="radio"/> Dependents (Chapter 35) <input type="radio"/> Vocational Rehabilitation (Chapter 31) <input type="radio"/>
SOCIAL SECURITY NUMBER:	<u>ENROLLMENT STATUS</u>	
	Non-Degree <input type="radio"/> Provisional <input type="radio"/> Degree <input type="radio"/>	
VA FILE NUMBER:		
PSU ID:		

Are you currently on active duty? Yes No Do you have a graduate assistantship? Yes No (If yes, please submit a current copy of your contract or a letter from your department indicating the level of assistantship.)
 Do you have a disability? Yes No

Have you ever used your benefits? Yes No
 If yes, please list the name of the last school or Penn State campus location: _____
 Also list the last semester you received benefits: _____

How many credits do you plan to take Fall 2006? 12 or more: <input type="radio"/> 9, 10, or 11: <input type="radio"/> 6, 7, or 8: <input type="radio"/> 4 or 5: <input type="radio"/> 3 or fewer: <input type="radio"/> Do you plan to graduate Fall 2006? Yes <input type="radio"/> No <input type="radio"/>	How many credits do you plan to take Spring 2007? 12 or more: <input type="radio"/> 9, 10, or 11: <input type="radio"/> 6, 7, or 8: <input type="radio"/> 4 or 5: <input type="radio"/> 3 or fewer: <input type="radio"/> Do you plan to graduate Spring 2007? Yes <input type="radio"/> No <input type="radio"/>
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Remarks (for Office use):

Please note: The Fall 2006 Advance Payment deadline is 31 May 2006; the Spring 2007 Advance Payment deadline is 1 November 2006.

Student's Signature: _____ **Date:** _____

I wish to receive **Advance Payment** for _____(semester) _____(year).

Student's Signature: _____ **Date:** _____