

CERTIFICATION REQUEST: VA EDUCATIONAL BENEFITS

FALL 2009 / SPRING 2010

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: _____

HOME PHONE: _____

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

WORK PHONE: _____

CELL PHONE: _____

EMAIL ADDRESS: _____

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

COLLEGE / MAJOR: (DUS, Engineering, GIS, Health and Human Development, LAS, Liberal Arts, etc.)

PROGRAM

VA EDUCATIONAL BENEFITS

- | | | | |
|-------------|-----------------------|--|-----------------------|
| Certificate | <input type="radio"/> | Post 9/11 GI Bill (Chapter 33) | <input type="radio"/> |
| Associate | <input type="radio"/> | Montgomery GI Bill: | |
| Bachelors | <input type="radio"/> | Active Duty (Chapter 30) | <input type="radio"/> |
| Masters | <input type="radio"/> | Selected Reserves (Chapter 1606) | <input type="radio"/> |
| Doctoral | <input type="radio"/> | REAP/Reserve Educational Assistance Program (Chapter 1607) | <input type="radio"/> |

SOCIAL SECURITY NUMBER:

ENROLLMENT STATUS

Dependents (Chapter 35)

VA FILE NUMBER:

- | | | | |
|-------------|-----------------------|--|-----------------------|
| Non-Degree | <input type="radio"/> | Vocational Rehabilitation (Chapter 31) | <input type="radio"/> |
| Provisional | <input type="radio"/> | | |
| Degree | <input type="radio"/> | | |

PSU ID:

Are you currently on active duty? Yes No

Are you receiving Federal Tuition Assistance (FTA)? Yes No

Do you have a service connected 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: _____

Have you submitted forms to the VA? Yes No

If yes, which form:

"Application for VA Educational Benefits" submitted via mail or via VONAPP

"Change of Program or Place of Training"

If no, please submit the appropriate form and supporting documentation to our office.

How many credits do you plan to take Fall 2009?

12 or more:

9,10, or 11:

6,7, or 8:

4 or 5:

3 or fewer:

How many credits do you plan to take Spring 2010?

12 or more:

9,10, or 11:

6,7, or 8:

4 or 5:

3 or fewer:

Do you plan to graduate Fall 2009? Yes No

Do you plan to graduate Spring 2010? Yes No

Remarks (for Office use)

Student Signature _____ Date _____