SCTCC Veteran Enrollment Certification Form

Semester _____ Student ID _____

Name _____
(please print)

Phone Number: _____

What is your current major? _____

Which Educational Assistance Program(s) do you plan to use?

_____ CH 33-Post 9/11 – *Please turn in your Certificate of Eligibility showing your percent of eligibility*

_____ CH 33-Post 9/11 **while using Federal Tuition Assistance (FTA)**

_____ CH 1606-Nat'l. Guard/Reserves

_____ CH. 30-Active Duty

_____Survivors & Dependents (CH 35)

_____Voc. Rehab. (Chapter 31)

_____ Federal Tuition Assistance (FTA)

_____ State Tuition Reimbursement

* You may also be eligible for other educational benefits such as the MN GI Bill or other state education assistance. Please contact Jason Wehry at (320) 493-8153.

Attach a copy of your Fee Statement and return to Anita Baugh (Financial Services)

Please list any class you are repeating that you have previously taken.

_____

_____

I understand that I need to let the VA Certifying Official (Anita Baugh) know if I change my schedule (either add classes or stop attending any class for any reason/period of time). I also understand that I will be responsible for any bill created by the use of VA funding or FTA.

_____   _____
signature   date