

# 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

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