

INSTRUCTIONS: This is a form to be used by servicepersons, veterans, reservists and dependents to request certification for US Department of Veterans Affairs education benefits. **YOU MUST COMPLETE THIS FORM EACH SEMESTER.**

PART I - APPLICANT

1. NAME OF APPLICANT (last, first, middle initial)	2. Chapter 30 1606 35 31 33 Yellow Ribbon/33 (check ONLY one): If you are Post 9/11 Chapter 33, what is the percentage of your eligibility (Tier Pay)? Please provide a copy of your Certificate of Eligibility showing percentage. Are you currently ACTIVE DUTY? Yes No	
3. STUDENT ID (T-NUMBER):	6. MAJOR(S):	
4. SOCIAL SECURITY NUMBER:	7. CONCENTRATION(S):	
5. PHONE NUMBER:	8. FILE NUMBER (CH 35):	9. GRADUATION TERM:

9. Will you be utilizing Military Tuition Assistance for this term? YES NO
Tuition Assistance is a benefit paid to eligible member of the Army, Navy, Marines, Air Force, and Coast Guard and is a separate benefit from Veterans Educational Benefits. Contact your Armed Forces Branch for eligibility criteria, application process, and restrictions.

PART II - ENROLLMENT DATA

10. CERTIFICATION is requested for: FALL SPRING SUMMER YEAR

<u>SUBJECT</u>	<u>COURSE NUMBER & SECTION</u>	<u>COURSE TITLE</u>	Office of Military and Veterans Affairs/Bursar Office Use Only			
			√ CERTIFIABLE	√ NON-CERTIFIABLE	CODE	REASON CODES
<i>Example:</i>	<i>Example:</i>	<i>Example:</i>				1. Excessive Course 2. Repeat Course 3. No ROTC contract 4. Not in Program of Study 5. Other _____
ENGL	1010-001	English Composition				
						Circle one: Amendment Adjustment Reason:

Total Credit Hours:		Res		Total Hours		HRS		Bursar: list amt for certifiable courses ONLY: TOTAL InState T/F \$ _____ Yellow Ribbon TTU amt: \$ _____ TOTAL Out of State T/F: \$ _____ Bursar signature and date: _____
_____	_____	_____	_____	_____	_____	_____	_____	

11. After consultation with my Academic Advisor, the above listed courses are within my approved degree program. If my enrollment status changes, I must notify the Office of Military and Veterans Affairs within five (5) working days. I accept the Understanding Agreement on reverse side.	SIGNATURE OF STUDENT: Signature not required if submitted from your TTU student email account	DATE:
Certifying Official / Bursar Office Comments:	SIGNATURE OF VA CERTIFYING OFFICIAL	DATE:

Veterans Statement of Understanding Agreement And Acceptance of Responsibilities

FOR ALL CHAPTERS:

I agree to comply with, and accept responsibility for compliance with, all laws and regulations controlling eligibility for and receipt of veterans education benefits, and I further agree to indemnify and hold harmless TTU against any liability which may be determined against it by the U.S. Department of Veteran Affairs as a result of my failure to comply with all laws and regulations concerning eligibility for and receipt of veterans benefits, and to pay to TTU all costs of collection, including reasonable attorneys' fees, which are incurred in the recovery from me of any funds received from the U.S. Department of Veteran Affairs which I was not entitled to receive under said laws and regulations.

I understand if I make any course adjustments to my enrollment that I must notify the TTU Office of Military and Veterans Affairs within five (5) business days. I acknowledge that this can impact my Veterans Education Benefits.

I understand that if I do not complete all my courses or receive a punitive grade that I may be charged an overpayment by the U.S. Department of Veterans Affairs. The overpayment may include tuition, fees, and any other payments made on my behalf by VA. The U.S. Department of Veterans Affairs determines the amount of the overpayment, not TTU. If I have an existing overpayment with VA, my future benefit payments (including tuition and fees) may be withheld by VA until my overpayment is repaid in full.

I understand that the TTU Office of Military and Veterans Affairs will utilize my TTU e-mail as the official method of communication regarding reminders, paperwork, enrollment certification, courses, etc. It is my responsibility to check my TTU e-mail account regularly.

I understand that the U.S. Department of Veterans Affairs requires me to maintain proper attendance in all courses for which I receive VA Education Benefits for.

I understand I am not entitled to receive benefits for enrollment in courses which I have previously taken and passed, or for courses which are not required in the degree I am seeking.

I promise to submit a copy of my Certificate of Eligibility or Award Letter from the U.S. Department of Veterans Affairs to the TTU Office of Military and Veterans Affairs Official within five (5) business days of receiving it from VA

FOR CHAPTERS 30 and 1606:

I acknowledge that once my claim has been processed by the U.S. Department of Veterans Affairs, I must verify my enrollment at the end of every month during the enrollment period with the U.S. Department of Veterans Affairs.