

Student Name: \_\_\_\_\_

ID#: \_\_\_\_\_

Address\*: \_\_\_\_\_

Phone: \_\_\_\_\_

\*If this is a new address and/or phone number you must update this information through WebAdvisor.

**Indicate the chapter of education benefits you are applying for. Select *ONLY* one:**

- |                                     |  |                                       |
|-------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Chapter 30 | <input type="checkbox"/> Chapter 33 or Transfer of Entitlement | <input type="checkbox"/> Chapter 1606 |
| <input type="checkbox"/> Chapter 31 | <input type="checkbox"/> Chapter 35                            | <input type="checkbox"/> Chapter 1607 |

**PRIOR EDUCATION AND TRAINING**

- I have served in the United States Military in the following branch: \_\_\_\_\_
- I have **NOT** attended any other colleges besides Clovis Community College, Fresno City College, Madera Center, Oakhurst Center or Reedley College.
- I have attended the following college(s)\*:

Name of College	Dates Attended	Number of Units Attempted	Degree/Certificate Earned	Official Transcript on File

\*You must submit official academic transcripts from each school listed above to Clovis Community College-Evaluations for review/evaluation PRIOR to an enrollment certification being completed. In some instances we can waive this requirement for ONE semester. If you would like us to consider waiving this requirement for one semester **please initial** next to the following statement.

**ONE SEMESTER WAIVER FOR TRANSCRIPT EVALUATION:** \_\_\_\_\_ (Student Initial):

I am requesting that Clovis Community College waive the transcript evaluation requirement and certify my Veterans Education Benefits prior to a complete or official review of all of my prior education or training transcripts. **I understand that this waiver is good for one semester only and that no further certifications will be submitted until all of my transcripts have been officially evaluated.** I further understand that once my official prior education and training evaluation is complete it may be necessary to adjust my enrollment certification which may mean that I must pay back the VA benefits I have received.

**CERTIFICATION INFORMATION:**

I am requesting my enrollment certification be sent to the VA for (select one of the following options):

- OPTION 1:** The entire **2019-2020** academic year Summer 19 / Fall 19 / Spring 20
- OPTION 2: ONLY** the specified semester(s) marked:
 

<input type="checkbox"/> Summer 2019	<input type="checkbox"/> Fall 2019	<input type="checkbox"/> Spring 2020
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I understand I must complete this form in order for my enrollment to be certified. I certify that the information reported above is true and correct. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of benefits. I understand that it is my responsibility to request official transcripts from each school previously attended. I further understand that it is my responsibility to verify the receipt and evaluation of all transcripts with Clovis Community College-Evaluations. Failure to do so may cause a delay in the processing of my enrollment certification.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_