

| 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: | | |
|---|---------------------------------------|--------------|
| Chapter 30 | Chapter 33 or Transfer of Entitlement | Chapter 1606 |
| Chapter 31 | Chapter 35 | |

ID#:

Course Information:

Student Name:

The courses I am enrolled in are on my Veteran Student Education Plan

I have met with a Veteran academic counselor this semester

Certification Tips:

- All Chapters-Online remedial courses are not eligible for certification.
- Chapters 30 and 35-If student is less than ½ time (6 units) student's payment will be equivalent to the amount of tuition being charged. The amount to be paid will not exceed the amount listed in the current rate table <u>https://www.benefits.va.gov/gibill/resources/benefits_resources/rate_tables.asp</u>
- Chapter 33 Post 9/11 students must be enrolled in more than ½ time (7 or more units) to receive the Monthly Housing Allowance (MHA).
- Chapter 33 Post 9/11 students must be enrolled in at least one resident (face to face) course in order to receive the full residence MHA. Hybrid courses are reported as resident courses.
- Chapter 33 Post 9/11 students who are enrolled in 7 or more units that are all online will receive 50% of the residence MHA.
- Chapter 33 Post 9/11-The VA will not pay the \$2.00 representation fee charged by the district for attending each campus. If you do not wish to pay out of pocket for these fees please opt out at the time of registration.

Certification Information:

I am requesting my enrollment certification be sent to the VA for the following semester:

I understand I must complete this form 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: