

OFFICE OF VETERANS AFFAIRS 300 North Beaty Street Athens, Alabama 35611 256-233-8271 or 256-233-8274 Fax 256-233-8279

VETERANS INFORMATION AND STATEMENT OF UNDERSTANDING

| Name | Date | Entering Semester | |
|---------------------------------------|--|--------------------------|------|
| Address | City | State | Zip |
| Home Phone | Work Phone | Cell Phone | |
| V.A. Claim Number (for Ch.35 depende | ents) | | |
| E-mail | | S.S. Number | |
| Benefit Status: Please Check | one of the following: | | |
| ☐ Montgomery GI Bill (CH30) ☐ G | il Dependent (CH35) ☐ Rehabilitatio | on (CH31) | |
| ☐ National Guard/Selective Reserve (| CH1606) □ REAP (CH1607) □ | ☐ Post 9/11 (CH33) | |
| Are you currently on Active Duty? Yes | □ No □ | | |
| Major (and minor if applicable) | | | |
| Please read and initial the sta | tements listed below: | | |
| | paperwork is processed to start my VA of my registered classes EVERY seme | | |
| withdrawal, last name, etc. at | address, phone number, major, hours any time during a semester or if I make he VA Office IMMEDIATELY of these cl | e changes before the | |
| plan. I understand that if I take | ay for courses that meet graduation req e a course and then receive prior credit ill have to pay the VA back for the cours | for the course (includes | |
| 9. | ay for courses that apply to my degree parts, pre-professional requirements, prof | • | |
| | that it is my responsibility and in my besulty advisor every semester to make sureking students only). | | |
| InitialsThe VA will no | t pay for a minor unless it is required fo | r my major. | |
| I have read the above s | statements and understand m | y responsibilities. | |
| | | | |
| Signature | | Date | 3/11 |