

UW-WHITEWATER
VETERANS SERVICES INFORMATION SHEET

Name : _____ Date of Birth: _____
Last First MI

Address: _____ UWW ID # _____
_____ S S #: _____

Home Phone # _____ Local Phone # _____ E-Mail: _____

Residency: In State _____ Out of State _____

VA Education Benefit Information: (Check One)

- Montgomery GI Bill (Chapter 30) Vocational Rehabilitation (Chapter 31) Old GI Bill (Chapter 34/30)
- Currently on Active Duty Post 9/11 GI Bill (Chapter 33) _____% of Benefit
- Montgomery GI Bill-Selected Reserve (Chapter 1606) Reserves or Nat'l Guard REAP (Chapter 1607) Activated Reserves or Nat'l Guard Under Title 10 Contingency Operations VEAP (Chapter 32)
- Post 9/11 Dependent Transfer (Chapter 33) Dependent (Chapter 35) VA File # _____

Academic Information:

Have you attended UWW before? YES () NO () Last Term & Year Attended: _____

Will you be concurrently enrolled at a second institution? YES () NO () School: _____

Have you attended another institution since your last term at UWW, or are you a transfer student from another institution? YES () NO () School: _____

Did you receive VA benefits at the previous institution? YES () NO ()

Classification: Graduate _____ Undergraduate _____

Current Degree Program _____

Term of Enrollment: Fall 20 _____ Spring 20 _____ Summer 20 _____ Expected Graduation Date: _____

Total Number of Credit Hours for this Term: _____ Are you repeating any Classes? YES () NO ()

If yes, please list: _____

Classes that do not meet for the entire semester are only certified for the period in which they meet. The VA will exclude them during the rest of the semester when determining how much you will be paid.

I understand that:

- All course work must be required for my approved degree in order to receive VA benefits
- I can only be paid for repeated courses when the initial grade received was an 'F'; VA will not pay for repeats of 'D' grades unless the course requires a 'C' to progress (i.e. MATH 141)
- No payment can be received for audited courses
- A waiver of PEGNRL 192 is available upon presentation of my DD214 or NOBE
- In the case of any failing grade, the instructor will be contacted to verify the last date of attendance
- I must notify this office of any changes in my enrollment for this semester and that such changes could impact my level of educational benefits including potential repayment of benefits (tuition, monthly payment, etc)
- I must complete this form each and every semester in which I wish to be certified for VA educational benefits
- I consent to the release to the US Department of Veterans Affairs all of my student education records maintained by the University of Wisconsin-Whitewater, including but not limited to my Social Security Number
- Chapters 30, 1606 and 1607 recipients must verify enrollment monthly (online via WAVE or by phone)

Signature

Date