UNT Veteran Enrollment Certification Form - Fall 2019

To request certification, please complete, print and sign this document. Scan and email the form(s) to:

Registrar.Veterans@unt.edu, fax to 940-565-3441, or deliver in person to General Academic Building (GAB), Suite 102

Student Veteran Services - Benefits.

**Chapter 33 Post 9/11 students must submit an updated Award Letter or eBenefits Education Enrollment Status statement <u>each</u> semester.

| Address: [] Address Change UNT Email Address: City, State, Zip Phone #: Alternate Phone #: Major: Minor or Secondary Major: Minor or Secondary Major: If yes, please complete 22-1995 or 22-5495 Are you participating in any of the below programs this semester? | J | Please allow up t | | processing to the VA R | egional Office. | |
|--|--|--|--|---|--|--|
| Name: (Last, First, Middle) Address: [] Address Change UNT Email Address: [] Address Change UNT Email Address: [] Address: | | (DI EASE EII | | | VE IN DAY) | |
| Major: Have you changed your major/degree plan since last semester? [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] Ye | • | | | | VA File No. (Ch. 35 only) | |
| Have you changed your major/degree plan since last semester? Jess []No If yes, please complete 22-1995 or 22-5495 Jess []No If yes, please complete 22-1995 or 22-5495 Jess []No Jess [] | Address | | 1 Address Change | LINT Empil Address | | |
| Major: Have you changed your major/degree plan since last semester? [] Yes | Audress: [] | |] Address Change | UNT Email Address: | | |
| Minor or Secondary Major: | City, State, Zip | | | Phone #: | Alternate Phone #: | |
| If yes, please complete 22-1995 or 22-5495 Tyes No | Major: | | last semester? | your major/degree plan sir | | |
| Are you participating in any of the below programs this semester? [] Study Abroad [] Internship [] Student Teaching [] Externship [] Practicum [] Co-op [] None WithCH TYPE OF EDUCATION BENEFITS ARE YOUR RECEIVING? [] 33 (POST9/11) % rate [] 30 (MGIB) [] 31 (VOC REHAB) [] 35 (DEPENDENT) % rate [] 30 (MGIB) [] 31 (VOC REHAB) [] TRANSFERABILITY CH. 33 (DEPENDENT) % rate [] 30 (MGIB) [] TRANSFERABILITY CH. 33 (DEPENDENT) % rate Student Status: [] Recertification (Previously Certified w/UNT) [] Incoming Student (First Time Using VA Education Be [] Transfer Student from (last school where VA was used) | Minor or Secondary Major: | | | ete 22-1995 or 22-5495 | []Yes []No | |
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| [] 33 (POST9/11)% rate [] 30 (MGIB) [] 31 (VOC REHAB) [] 35 (DEPENDENT) [] 1606 (RESERVE) [] TUITION ASSISTANCE [] TRANSFERABILITY CH. 33 (DEPENDENT)% rate Student Status: [] Recertification (Previously Certified w/UNT) [] Incoming Student (First Time Using VA Education Be [] Transfer Student from (last school where VA was used) | | | | | cum []Co-op []None | |
| Please complete the applicable sessions below (list only enrolled hours at UNT): Semester/Term In-Residence Online/Hybrid Hours Enrolled (by session) Additional Remarks: | [] 33 (POST9/11)% | rate [] 30 (MG | IB) [] 31 (| VOC REHAB) | | |
| Semester/Term In-Residence Hours Enrolled (by session) Hours Enrolled (by session) Additional Remarks: Fall 2019 8 Week 1 8 Week 2 | | from (last school wh | nere VA was used) | | | |
| Hours Enrolled (by session) Fall 2019 8 Week 1 8 Week 2 BY SIGNING THIS FORM, I ACKNOWLEDGE THAT: • I must complete the VA Enrollment Form each semester AFTER I register. • Post 9/11 students: Please note, you must turn in a copy of the award letter you received from the VA during the semester you used your education benefits or a current eBenefits Education Enrollment Status page before we submit your enrollment to the VA. • I understand enrollment will only be certified for courses required on my degree plan. I will not receive VA Educational for repeat courses unless the first attempt resulted in a failing grade or withdrawal. • I must inform UNT Student Veteran Services office of any and all changes I make to my schedule. • I understand the VA will hold me responsible for any overpayment of my educational benefits as a result of dropping conon-attendance, withdrawing from UNT, etc. • I am responsible for paying any remaining balances on my account or risk being dropped from my classes. I am responshencing www.my.unt.edu for remaining account balances for tuition and fees that are not covered by my VA Education benefits. • I understand benefit payments are always paid one month in arrears. Initial payment of benefits may be delayed at the VA Processing Office due to workload. • I authorize the release of all academic records and information by UNT to the Veterans Administration. | | | | | I hours at UNT): | |
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| Signature of UNT Veteran/Dependent-Student Date | Signature of UNT Vete | ran/Dependent-Stude | ent | Date | | |

U _____ G____ Page___ CPT_____ Chapter___ AL/COE _____ 214__ Group-Date/Int. __