

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 each semester.**

Please allow up to 30-45 days for processing to the VA Regional Office.

Student Information (PLEASE FILL OUT COMPLETELY TO AVOID DELAYS IN PAY)			
Name: (Last, First, Middle)	SSN:	UNT ID#:	VA File No. (Ch. 35 only)
Address: [] Address Change		UNT Email Address:	
City, State, Zip		Phone #:	Alternate Phone #:
Major:	Have you changed your major/degree plan since last semester? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete 22-1995 or 22-5495	Is this your final semester before Graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Minor or Secondary Major:			
Are you participating in any of the below programs this semester? <input type="checkbox"/> Study Abroad <input type="checkbox"/> Internship <input type="checkbox"/> Student Teaching <input type="checkbox"/> Externship <input type="checkbox"/> Practicum <input type="checkbox"/> Co-op <input type="checkbox"/> None			
WHICH TYPE OF EDUCATION BENEFITS ARE YOU RECEIVING? <input type="checkbox"/> 33 (POST9/11) _____ % rate <input type="checkbox"/> 30 (MGIB) <input type="checkbox"/> 31 (VOC REHAB) <input type="checkbox"/> 35 (DEPENDENT) <input type="checkbox"/> 1606 (RESERVE) <input type="checkbox"/> TUITION ASSISTANCE <input type="checkbox"/> TRANSFERABILITY CH. 33 (DEPENDENT) _____ % rate			

Student Status: [] Recertification (Previously Certified w/UNT) [] Incoming Student (First Time Using VA Education Benefits)
 [] Transfer Student from (last school where VA was used) _____

Please complete the applicable sessions below (list only enrolled hours at UNT):

Semester/Term	In-Residence Hours Enrolled (by session)	Online/Hybrid Hours Enrolled (by session)	Additional Remarks:
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 last semester you used your education benefits or a current eBenefits Education Enrollment Status page before we can 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 benefits 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 courses, non- 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 responsible for checking www.my.unt.edu for remaining account balances for tuition and fees that are not covered by my VA Educational benefits.
- I understand benefit payments are always paid one month in arrears. Initial payment of benefits may be delayed at the Regional VA Processing Office due to workload.
- I authorize the release of all academic records and information by UNT to the Veterans Administration.
- I am enrolled in courses for each semester/term listed above and the information is true and correct.

Signature of UNT Veteran/Dependent-Student

Date

UNT SVS Office Use Only:

U _____ G _____ Page _____ CPT _____ Chapter _____ AL/COE _____ 214 _____ Group-Date/Int. _____