



VA Certification Request and Student Responsibility Form

(Must be submitted each term you request certification)

SECTION I: STUDENT INFORMATION

Full Name: _____

Student ID: _____

SECTION II: TERM REQUESTING CERTIFICATION

Year: _____

Term: Fall Spring Summer

SECTION III: VA EDUCATION BENEFIT PROGRAM

Select the benefit you are requesting certification for (select one):

Chapter 33 – Post-9/11 GI Bill®

Percentage of Eligibility: _____ %

Chapter 31 – Veteran Readiness & Employment (VR&E)

Chapter 30 – Montgomery GI Bill® (Active Duty)

Chapter 1606 – Montgomery GI Bill® (Selected Reserve)

Chapter 35 – Dependents' Educational Assistance (DEA)

For Chapter 35 (DEA) Recipients Only:

VA File Number: _____

Veteran/Sponsor Name: _____

Chapter 32 – VEAP

SECTION IV: PROGRAM CHANGES

Have you changed your major/program since your last certification?

Yes No

SECTION V: TRANSCRIPTS & PRIOR CREDIT

I have submitted official transcripts from all previously attended colleges/universities.

I have submitted all required military transcripts (e.g., JST, CCAF).



**SECTION VI: STUDENT CERTIFICATION REQUEST AND RESPONSIBILITY
ACKNOWLEDGEMENT**

Check to acknowledge each statement below:

- I understand that I am financially responsible for my education and enrollment at Benedictine University. It is my responsibility to notify and authorize the University's certifying officials each term upon enrollment so that my certification can be submitted to the Department of Veterans Affairs on my behalf. I will promptly inform the Office of Financial Aid of any changes to my enrollment status. I acknowledge that changes in enrollment are reported to the VA and may result in a debt for which I am responsible.
- I understand that the Department of Veterans Affairs generally does not provide payment for courses that are not required for my declared academic program, courses in which I do not attend or actively participate, courses from which I withdraw, or courses that I complete but earn a grade that does not apply toward graduation requirements.
- I understand that I am required to submit official transcripts from all previously attended colleges, universities, and post-secondary institutions, as well as all applicable military transcripts. I acknowledge that failure to provide complete and accurate academic records may delay the evaluation of my transfer credits, certification of benefits, or enrollment processing. I accept full responsibility for ensuring that all prior academic and military transcripts are submitted in a timely manner.

By signing below, I confirm that I have read and understand the statements above and certify that the information submitted with my certificate request is true and accurate.

Signature _____

Date _____