

## <u>Veterans Declaration of Intent</u> for Educational Benefits Hood College, Financial Aid Office

The use of this form confirms your desire to receive VA educational benefits for the semester specified. No certification will be initiated without this form. Enrollment certification will be processed upon receipt of the completed form, submission of supporting documents (where applicable) and registration for the designated semester in the courses listed on the reverse of this form.

Semester (com		Winter 20 Spring 20 Summer 20 summer 20 Summer 20.	
	Pers	sonal Information	
Last Name:		First Name:	
Social Security Number:		Email Address:	
*Address:			
	Street		
Home Phone:	City	State Zip	
	uninterrupted benefits it is necessary	to promptly report address changes to the Dept. of Veterans	
When/where di	id you begin receiving VA education	al benefits? Year Institution	
New Studer		Year Institution Graduating Senior: Expected Grad Date: (Graduating this semester; notify VA Certifying Official immediately of any change)	
	<u>V</u>	'A Information	
Chapter under	which you wish to be certified:		
	(Montgomery GI Bill) (Vocational Rehabilitation)		
		ply: urrently on Active Duty bouse is currently on Active Duty	
	i (Survivors and Dependents Education in the second se	onal Assistance) (required for Chapter 35 students)	
Chapter 16	606 (Selected Reserve)		

## **Hood College Program Information**

## Educational Plans:

<ul> <li>Undergraduate Degree</li> <li>Core requirements</li> <li>Foundation courses</li> <li>Foundation AND Core requirements</li> <li>Certification Program Only</li> <li>Graduate/Post Grad Degree</li> </ul>				
Major : Change of Major?  No Yes	Advisor:			
<b>Required Information for Veterans and Dependents</b>				
Courses for which you wish to be certified this semester (use a separate form for each semester):				
	Credit	Is Course		
Course Number and Title	Hours	Required?		

## Information and Personal Responsibility for Receiving VA Benefits

- 1. All persons receiving VA educational benefits are required to attend classes on a regular basis. All courses that are not successfully completed must be reported to the Veterans Administration. All certified courses must pertain to your VA recognized curriculum.
- 2. Benefits for courses with a non-standard schedule (i.e., .5 credit P.E. courses, weekend seminar courses) will be paid only for the portion of the semester in which the course is actually scheduled.
- 3. It is your responsibility to notify the VA Certifying Official if you add, drop or withdraw from a course, withdraw from the college, or make other changes that would affect your VA payment status.
- 4. It is your responsibility to notify the VA Certifying Official if you make any changes to your enrollment which would impact your tuition and/or fees.
- 5. Chapter 33 students must submit the Certificate of Eligibility (and any updates if applicable) to the VA Certifying Official upon receipt from the VA.

I attest that the information contained on this form is accurate and complete. I understand that the release of my academic record to the VA may be required and I authorize same. I have read and understand my personal responsibilities in claiming VA benefits. My failure to comply may jeopardize my continued receipt of VA educational benefits and cause possible repayment of benefits already received.

Veteran/Veteran Dependent Signature

Date

Financial Aid Office: 301-696-3414/3319 Fax: 301-696-3812