

Veterans Enrollment Certification Request



Office of Student Financial Aid
University of Illinois at Urbana-Champaign
620 East John Street – MC 303
Champaign, IL 61820-5712
Fax (217) 265-5516 Phone (217) 333-0100

After your class registration has been **finalized** each term, use this form if you require the Office of Student Financial Aid to certify your enrollment with the Department of Veterans Affairs.

Student Name: _____
Last First MI

UIN: _____
(Number on I-Card or Admissions Letter)

☐ **Fall 2014** ☐ **Spring 2015** ☐ **Summer 2015**
I am requesting certification of my enrollment for the **ONE term** selected above.

- ☐ Check this box if you are on active duty or terminal leave.
- ☐ Check this box if you have changed your program of study since your last certification request was submitted. You are required to submit a Change of Program Form (VA Form 22-1995 or VA Form 22-5495), before we will certify your enrollment. If you are the veteran, submit VA Form 22-1995. If you are a dependent of a veteran, submit VA Form 22-5495. These forms are available at www.osfa.illinois.edu under Forms.

1. Identify your federal benefit: Check one VA education benefit that you are eligible to receive for the current term:

- ☐ I receive Chapter 33 Post-9/11 GI Bill
- ☐ I receive a non-Chapter 33 benefit (select the appropriate benefit below)
- | | | |
|--|--|---|
| <input type="checkbox"/> Chapter 30 Montgomery GI Bill | <input type="checkbox"/> 1607 REAP | <input type="checkbox"/> 1606 Montgomery GI Bill Reserves |
| <input type="checkbox"/> Chapter 31 Vocational Rehab | <input type="checkbox"/> Chapter 32 VEAP | <input type="checkbox"/> Chapter 35 Dependents Education Program* |

2. Identify your other types of tuition and fee restricted funding:

- | | | |
|---|--|--|
| <input type="checkbox"/> Illinois Veterans Grant (IVG) | <input type="checkbox"/> National Guard Grant | <input type="checkbox"/> Fellowship/Assistantship Tuition & Fee Waiver |
| <input type="checkbox"/> MIA POW Scholarship | <input type="checkbox"/> Children of Veterans | <input type="checkbox"/> Child of Employee Tuition Waiver |
| <input type="checkbox"/> Vocational Rehabilitation | <input type="checkbox"/> ROTC State or Federal Grant | <input type="checkbox"/> MAP Monetary Award Program |
| <input type="checkbox"/> Tuition Restricted Scholarship: _____ | | |
| <input type="checkbox"/> Specify other tuition and fee restricted resources, including those that require a Sponsor Payment Plan Application through University Student Financial Services and Cashiers Operations: _____ | | |

3. Direct our office on how to use your other funding: Note: for Chapter 33 recipients. Chapter 33 is last payor; we will report remaining tuition and fees after your other restricted funding is disbursed or applied unless otherwise instructed by you. Please check the appropriate box below. If you elect not to use your other tuition restricted aid below, in order to fully utilize your Chapter 33 benefit, be sure to write out the award you wish to decline.

- ☐ I elect to **not** use the following tuition and fee restricted award(s) for the term selected above and request the Office of Student Financial Aid to cancel the following award(s) in order to use my full Chapter 33 benefits.

Name of Award(s): _____

- ☐ I understand that if I receive any tuition and fee restricted award, and have not waived them in the section above, the VA will reduce the tuition and fee portion of my Chapter 33 benefits so the combination of funds does not exceed my University tuition and fees charges. The VA Basic Allowance for Housing (BHA) and books will not be affected.
- I certify that I have read all of the information on both pages of this form and that the information I provided above is complete and correct.
 - I agree to update OSFA if I change my enrollment after submitting this initial request to certify.
 - I understand the amount of my Chapter 33 benefits will reduce my eligibility for other need based aid awarded by the University of Illinois Urbana.

Student Signature _____

Date _____

www.osfa.illinois.edu

Email: osfaveterans@illinois.edu

Fax: (217) 265-5516

Veteran Rights and Responsibilities



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Please retain this form for your education file:

YOU MUST:

- Submit a copy of your original Certificate of Eligibility defining your benefit. Each term submit a copy of your award letter which you will receive from the VA approximately 2 weeks after your enrollment is certified.
- Notify the Office of Student Financial Aid (OSFA) any time you change your enrollment after your initial certification of a term by submitting an Enrollment Change for VA Education Benefits Form.

Your eligibility for VA benefits depends on the following terms and conditions:

- I understand changes in the number of hours of enrollment will be reported to the VA and may affect my eligibility.
- I understand I must immediately notify OSFA Veterans' Services by submitting an "Enrollment Change for VA Education Benefits" form of any changes in my status including but not limited to:
 - I have increased or reduced my enrollment since my last VA certification
 - I change my declared major (registered program of study)
 - I decide to receive payments under a different education program
 - I initiate action to withdraw from the University
 - I am called to active duty
 - I have a change in tuition and/or fee assessment
- I understand I must be admitted to a degree program to receive payment of benefits.
- I understand that effective August 1, 2011 break pay or interval pay is no longer payable under **any** VA education program.
- I understand the University will not disclose information collected to any source other than what has been authorized under the Privacy Act of 1974 or Title 38 Code of Federal Regulations Section 1.526 for routine uses in assisting claims and reporting my status to the VA.
- I understand I must maintain Satisfactory Academic Progress (SAP) (38 U.S.C 3034(a) 3323(a), 3684). Failure to maintain satisfactory standards of progress may result in suspended payment of Post- 9/11 GI Bill (Chapter 33) education benefits. Go to www.osfa.illinois.edu/process/SAP/index.html for detailed information.
- I understand I may use VA education benefits in conjunction with Title IV financial aid by submitting the Free Application for Federal Student Aid (FAFSA). I should not include VA education benefits when reporting income and resources information on this form.
- VA education benefits are paid in arrears and may require completing monthly Self Certifications.
- The minimum program enrollment required for receipt of the maximum benefit payment for VA education programs and Social Security benefits is twelve hours continuous enrollment in a semester (six hours in the summer term). The number of hours enrolled determine the level of payment (§ 3-301 Academic Policies and Regulations). The number of hours required for receipt of maximum benefit for programs with terms of other lengths is determined proportionately (students are permitted 9 months to complete course offered through the Office of Continuing Education however the credit hours are used to determine the maximum benefit during one single term).

Irrevocable Benefit Election: You acknowledge that your election to use Chapter 33 benefits is irrevocable. Contact the Department of Veterans Affairs 1-888-442-4551 or <http://www.gibill.va.gov> for additional information.

Liability: During your academic career it may become necessary for you to withdraw due to emergencies. You must contact the Office of Student Financial Aid Veterans' Services to provide documentation and submit a Statement in Support of Claim for adjudication if extenuating circumstances precluded your withdrawal. You are responsible for the overpayment created if the VA makes a determination that you owe a debt. You must confer with the Department of Veterans Affairs Debt Management Center (800-827-0648 or 612-970-5700) to make repayment arrangements or petition for a waiver.

Reversed Transferability: Students using VA education benefits transferred to them should be aware that their sponsor has the right to remove them as a recipient; as a result their benefits may be expunged.