WESLEYAN First for Women	Enrollment Verification Form VA Benefits				
NAME:	SSN:				
CURRENT SEMESTER:	_ EXPECTED GRAD DATE:				
GI BILL CHAPTER: (CHECK ONE) 30	□ 31 □ 32 □ 33 (Post9/11) □ 35 □ 1606				
ADDRESS:					
IS THIS A CHANGE OF ADDRESS FROM W	HAT THE VA HAS ON FILE? \Box YES \Box NO				
MAJOR:	MINOR:				
HAVE YOU CHANGED YOUR MAJOR? (IF YES, YOU ARE REQUIRED TO COMPLETE VA F					
VERIFICATION OF ENROLLMENT:					

COURSE NAME	NUMBER	START DATE	END DATE	HOURS	GEN ED	MAJOR/ MINOR	REPEAT?	ONLINE/ HYBRID/ DISTANCE

PLEASE READ AND SIGN BELOW:

- ✓ THIS FORM IS TO BE COMPLETED AND TURNED IN <u>EACH SEMESTER</u> TO THE FINANCIAL AID OFFICE TO INSURE PROPER AND ACCURATE REPORTING TO THE REGIONAL VETERANS AFFAIRS (VA) OFFICE.
- ✓ THE VA WILL ONLY PAY PHYSICAL EDUCATION COURSES REQUIRED FOR GRADUATION BY YOUR MAJOR.
- ✓ ONLY IN RESIDENCE COURSES WILL BE CERTIFIED TO THE VA. ONLINE/HYBRID/INDEPENDENT STUDY MAY NOT QUALIFY.
- ✓ REPEATING COURSES IS ONLY PAID FOR BY THE VA IN THE EVENT THAT A PASSING GRADE WAS NOT RECEIVED OR THAT A "C" OF BETTER IS REQUIRED FOR YOUR MAJOR.
- ✓ ANY CHANGES TO THIS SCHEDULE NEED TO BE REPORTED **WITHIN THREE WORKING DAYS** TO THE FINANCIAL AID OFFICE TO PREVENT OVERPAYMENT OR UNDERPAYMENT OF BENEFITS.
- ✓ ANY QUESTIONS CAN BE DIRECTED TO THE FINANCIAL AID OFFICE AT 478-757-5205 OR THE REGIONAL VA OFFICE AT 1-888-442-4551.

STUDENT SIGNATURE:	 DATE:
ADVISOR SIGNATURE:	 DATE:
REGISTRAR SIGNATURE:	 DATE: