



Name: _____ Student ID: _____

Address: _____

Phone: _____ Email Address: _____

Enrollment Term: FALL SPRING SUMMER YEAR: _____

I am a: New Student Returning Student Returning Student, Different Program

I am a: VETERAN SPOUSE OF A VETERAN CHILD OF A VETERAN

Program of Study: _____

Branch of Service: _____ Year of Discharge: _____

Education Benefit Used in the Past: _____

When: _____ Where: _____

VA Education Benefit You Plan to Use THIS Year:

- Chapter 33 (Post 9/11 GI Bill)
 - If you are using Chapter 33 benefits you must also fill out the Supplemental Payment Form.
- Chapter 35 (Survivors and Dependents)
- Chapter 30 (Montgomery GI Bill-Active Duty)
- Chapter 1606 (Montgomery GI Bill-Selected Reserve)
- Chapter 1607 (Reserve Educational Assistance Program)
- Veterans Educational Assistance Program (VEAP)
- Wisconsin GI Bill
- Wisconsin National Guard Tuition Grant
- Go Army Ed

I understand:

- If I am using a Federal Benefit, only required courses of my program will be certified.
- **I must maintain a 2.0 GPA for both State and Federal Benefits to maintain benefit eligibility.**
- I must notify this office of any changes of enrollment for this semester that could impact the repayment of benefits I have received.
- **If I am receiving Chapter 30, 1606 or 1607 benefits, I must verify my attendance monthly by calling 877-823-2378 or online at <https://www.gibill.va.gov/wave/index.do>.**

Signature

Date



Supplemental Payment

Semester: _____

ID: _____

FIRST NAME _____ LAST NAME _____

What % of Chapter 33 Post 9/11 GI Bill are you eligible for? _____ (between 40-100%)

Which Chapter did you give up to use Post 9/11? 30 1607 Other _____

If you were eligible for Chapter 30, how much Active Duty did you have?

Less than 3 years More than 3 years

If you were eligible for Ch. 1607 indicate your active duty period(s): _____

If you were eligible for Ch. 1607, are you still drilling with your Guard/Reserve Unit? Yes No

Are you now on Active Duty Orders Title 10? Yes No

Do you have a Buy-Up? Yes, Amount \$ _____ No

Do you have a Kicker contract? Yes, Amount \$ _____ No

Are all of your classes online? Yes No

Signature

Date

Return to CoraBeth Halverson, Veterans Certifying Official