



## APPLICATION FOR WISCONSIN G.I. BILL

Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m)].

### **APPLY EARLY!**

**Applications for the Wisconsin Technical College System (WTCS)** should be submitted to the district Veterans Certifying Official and WDVA by the fourteenth (14th) calendar day of the semester (WTCS Date of Record).

**Applications for University of Wisconsin** institutions should be submitted to the educational institution and the Wisconsin Department of Veterans Affairs (WDVA) within fourteen (14) calendar days from the official start of the term for the fall or spring term, by June 1st for summer terms, and by the due date for term fees for interim terms.

Applying within the suggested timeline allows for financial aid to be accurately determined and reduces the risk of students receiving an overpayment that would need to be repaid to the institution.

### **THIS FORM IS FOR SUBMISSION TO THE EDUCATIONAL INSTITUTION**

**Please note: Eligibility for the WI GI Bill is *a two part process*. WDVA certifies the veteran is eligible, and UW/WTCS determines the student (veteran, spouse, or child) is eligible for the tuition remission based on state law.**

Student Name (Print)

Date of Birth

(       )

Address

Telephone Number

City, State, Zip Code

Social Security Number

Email Address

Campus Student ID Number

I am applying for the Wisconsin G.I. Bill Benefits/Tuition Remission based on my status as (*check as many as apply*):

Veteran (Myself)

Spouse of

Unremarried Surviving Spouse of \_\_\_\_\_ Full Name of Veteran

\_\_\_\_\_  
Veteran's Date of Birth

Child of

I will attend (*check one*):

University of Wisconsin

Wisconsin Technical College \_\_\_\_\_  
Print Full Name of Campus (NO ABBREVIATIONS)

\_\_\_\_\_  
Beginning (mo/yr)

Fall     Spring     Summer     Other    20 \_\_\_\_\_

I have received Wisconsin G.I. Bill benefits previously, and I most recently attended the following UW or Wisconsin Technical College institution:

\_\_\_\_\_  
Name of Campus

\_\_\_\_\_  
From (mo/yr)

\_\_\_\_\_  
To (mo/yr)

I am or will be receiving (*check all that apply*):

Reserve Officers' Training Corps (ROTC) Scholarship benefits [10 USC 2107(c)]

Federal VA Ch. 31 Vocational Rehabilitation benefits [38 USC 3104(a)(7)(A)]

**YOU MUST CHECK ONE BOX UNDER EACH QUESTION**

1. If you plan to use Wisconsin G.I. Bill benefits, please check one and initial:

- I declare that I have no active-duty military service following Sept. 10, 2001.  
*\*Please do not include basic training, initial job training and drill obligations as active-duty.*
- I declare that I have active-duty military service following Sept. 10, 2001.
  - I have applied or will apply for federal Post-9/11 G.I. Bill benefits beginning with the indicated semester/term:
  - I understand that I must provide either my Certificate of Eligibility for federal Post-9/11 G.I. Bill benefits or a federal Post-9/11 G.I. Bill benefits rejection notice from the federal VA to my school certifying official within **two weeks** of receiving it.
- I declare that I have 12 months or less of a federal military benefit remaining, and I plan to exhaust it before applying for the federal Post-9/11 G.I. Bill in the following semester/term:
  - I understand that I may only continue to use the Wisconsin G.I. Bill as a veteran if I have 12 or fewer months of federal benefits remaining under Chapter 30, 1606, or 1607.
  - I understand that I may only continue to use the Wisconsin G.I. Bill as a child or spouse if I have 12 or fewer months of federal benefits remaining under Chapter 35, 1606, or 1607.
  - I understand I must provide a copy of my Web Automated Verification of Enrollment (WAVE) report or most current federal VA award letter showing months used and months remaining for Chapter 30, 35, 1606, or 1607 benefits.
- I declare I have fully exhausted my federal Post-9/11 benefits.

\_\_\_\_\_  
Initials of Applicant

\_\_\_\_\_  
Semester                      Year

\_\_\_\_\_  
Initials of Applicant

\_\_\_\_\_  
Semester                      Year

\_\_\_\_\_  
Initials of Applicant

\_\_\_\_\_  
Initials of Applicant

2. Have you transferred any federal Post-9/11 G.I. Bill benefits to a family member?

- I declare that I have not transferred federal Post-9/11 G.I. Bill benefits to a child or spouse.
- I declare that I have transferred federal Post-9/11 G.I. Bill benefits to a child or spouse.

\_\_\_\_\_  
Initials of Applicant

\_\_\_\_\_  
Initials of Applicant

3. Have any federal Post-9/11 G.I. Bill benefits been transferred to you by a parent or spouse?

- I declare that my parent or spouse has not transferred federal Post-9/11 G.I. Bill benefits to me.
- I declare that my parent or spouse has transferred federal Post-9/11 G.I. Bill benefits to me.
  - I understand that I must provide either my Certificate of Eligibility for federal Post-9/11 G.I. Bill benefits or a federal Post-9/11 G.I. Bill benefits rejection notice from the federal VA to my school certifying official within **two weeks** of receiving it.

\_\_\_\_\_  
Initials of Applicant

\_\_\_\_\_  
Initials of Applicant

**My signature below, affirms that I understand and agree to the following:**

1. My application for Wisconsin G.I. Bill benefits is not complete until I also request and obtain certification of veteran status from the Wisconsin Department of Veterans Affairs; and
2. The Wisconsin Technical College System and the University of Wisconsin System require my social security number for verification by the Wisconsin Higher Educational Aids Board for program eligibility, for federal and state reporting requirements, and for program evaluation purposes; and
3. The sharing of information contained in this form and any related information for the purposes of processing my application and implementing this program, with and among UW institutions, WTCS institutions, the Wisconsin Department of Veterans Affairs, and the State of Wisconsin Higher Educational Aids Board.
4. Under penalty of law, I further attest that all of the information provided on this and related documents is true and complete to the best of my knowledge. **I agree to inform my school certifying official of any change in the circumstances upon which this application is based before the beginning of the next term/semester.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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## HOW TO COMPLETE APPLICATION FOR THE WISCONSIN GIBILL (WDVA 2029)

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### Instructions:

1. All applicants must complete the form WDVA 2029 in full and submit it and the items listed below, as appropriate, to the School Veterans Certifying Official at the address listed at <http://veterans.wisconsin.edu>.
2. When you submit this application to the educational institution, you must also submit the Request for Certification (form WDVA 2030) to the Wisconsin Department of Veterans Affairs.
3. **For timely consideration, applications for University of Wisconsin institutions** should be submitted to the institution and WDVA within fourteen (14) calendar days from the official start of the fall or spring term, by June 1<sup>st</sup> for the summer term, and by the term fees' due date for interim terms.
4. **For timely consideration, applications for the Wisconsin Technical Colleges (WTC)** should be submitted to the district Veterans Certifying Official and WDVA by the fourteenth (14<sup>th</sup>) calendar day of the semester (WTCS Date of Record).

### Completion Checklist for Documents to Submit to College:

1. **Application (WDVA 2029)** (included in this packet). Fillable forms are available on our website at [www.WisVets.com/Forms#WDVA2029](http://www.WisVets.com/Forms#WDVA2029).
2. If Student Is Applying As Child of Eligible Veteran, provide documentation as follows:
  - a. **For Biological Child:** A photocopy of the student's Birth Certificate or similar official documents that identify parentage.
  - b. **For Adopted Child:** A photocopy of the student's Adoption Certificate.
  - c. **For Stepchild:** A photocopy of the student's Birth Certificate and Marriage License that demonstrates the eligible veteran has married a biological parent of the student, or a copy of the Certificate of Eligibility for Federal VA benefits that indicates recognition as a stepchild.
  - d. **For Other Child Who is a Member of the Veteran's Household:** A photocopy of the veteran's most recent state and federal income taxes where the student is listed as a dependent and the student's permanent address is the same as the veteran's household address.
  - e. **For Non-marital Child:** A photocopy of a Certificate of Paternity.
3. **If Student is Applying as Spouse of a Veteran:**
  - a. A photocopy of the Marriage Certificate showing the spouse's marriage to the certified veteran.
4. **If Student is Applying as Unremarried Surviving Spouse:**
  - a. A photocopy of the Marriage Certificate showing the spouse's marriage to the certified veteran.
  - b. A photocopy of the latest federal and state tax returns for the unremarried surviving spouse.
  - c. A photocopy of the Birth Certificate or adoption papers for the youngest child born to or adopted by the remarried surviving spouse and the certified veteran.
5. **If Using Federal Post-9/11 GI Bill—Documents Needed to Assess Eligibility for Supplemental Payment:**
  - a. Federal VA Certificate of Eligibility (COE) for the Post-9/11 GI Bill -OR- Current Federal VA Award Letter for Post-9/11 GI Bill.
  - b. Most recent DD-214.
  - c. Papers documenting "kicker" entitlements.
  - d. Papers or receipts documenting "buy-up" contracts.
6. **If Using Federal Post-9/11 GI Bill—Documents Needed to Demonstrate 12 or Fewer Remaining Months of Federal Benefit**
  - a. Web Automated Verification of Enrollment (WAVE) form showing remaining benefit eligibility.