

Arkansas Tech University-Ozark Campus
VETERANS CERTIFICATION REQUEST

Name: _____ Last 4 of SSN: _____ Student ID: T _____
Address: _____ City/State/Zip _____
Phone: (____) _____ Email _____

I need to be certified for the following terms (you must be ENROLLED to request certification):

☐ Summer ☐ Fall ☐ Spring Year: 20 _____

Number of hours enrolled for the term (s): _____ Are you repeating any courses: Yes/No

If you are repeating courses, you must list each course and give reason for the repeat:

(VA will **NOT** pay for non-required repeats or enrollment in course which will **NOT** count towards graduation (example: repeating a course that was completed successful to improve GPA, or adding extra hours to meet scholarship requirements.)

Which benefit are you eligible and requesting certification for?

_____ CH 30 Montgomery GI Bill	_____ CH 35 Dependent Education Assistance,
_____ CH 33 Post 9/11 GI Bill _____ %	VA file # _____
_____ CH 1606 MGB Select Reserve/Nat'l Guard	_____ CH 31 VA Voc. Rehab
_____ CH 1607 Reserve Education Assistance Program	

Major: _____ Degree Seeking: Associates/Technical Certificate

Has any of the above information changed since your last certification Yes/No

If yes please specify: _____

AS A STUDENT RECEIVING VA EDUCATIONAL BENEFITS, I UNDERSTANT THAT IT IS MY RESPONSIBILITY TO:

- Request certification for each semester that I attend ATU-Ozark campus using my VA education Benefits
- Promptly notify the Certifying Official of any changes in enrollment or degree program once certification has been submitted (Changes in enrollment may affect your rate of pay and can result in overpayments for which you will be held accountable.)
- Make satisfactory academics progress which is a 2.0 cumulative GPA each semester. (Failure to do so may result in academic probation/suspension which can affect future certification for benefits.
- Verify my attendance monthly if receiving CH 30, 1606, and 1607 benefits for each term enrolled.
- Check my ATU email on a regular basis for updates or notifications. (Failure to do so may result in delayed certifications or missed deadlines.)

I UNDERSTAND AND ACKNOWLEDGE THAT:

- VA will **NOT** pay
 - For courses that I do not attend
 - Certified courses for which I withdraw from
 - Non-required repeated courses
 - Courses for which I complete but receive a grade that will not count towards graduation
- A registration hold will be placed on my account once I request certification. This means that I must contact the school certifying official before any changes can be made to my schedule.

My signature indicates that I have provided accurate information and I understand and agree to comply with all ATU-Ozark Campus and VA guidelines. (Certification will not be submitted without signature.)

Signature

Date