

**THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER
CERTIFICATION FOR VA BENEFITS**

Name: _____

SSN: _____ Student ID #: _____

Military Status (circle one) Active Duty: current former Reservist Guard Dependent

Military Branch: (circle one) Army Navy Air Force Marine Coast Guard

Active Drilling Army Reserve or Guard only: Do you plan to use Tuition Assistance? (circle one) YES NO

Other than your VA benefits, will you be receiving any other scholarships **stated solely for the purpose of tuition?** (circle one) YES NO

Are you an employee receiving the **UMC employee tuition benefit?** (circle one) YES NO

Circle the VA chapter you will be using: 1606 1607 30 33 33 TOE 33 Fry 35

Chapter 1606=Select Reserve not called or ordered to active duty in response to a war or national emergency
Chapter 1607=Reserve components called or ordered to active duty in response to a war or national emergency
Chapter 30=Continuously served for 3 years, OR 2 years if that is what you first enlisted for
Chapter 33=Post 9/11 GI Bill veterans with 90 days or more of total active service on or after September 11, 2001
Chapter 33 TOE=Post 9/11 GI Bill Dependents of service members whose parent transferred their education entitlement
Chapter 33 FRY=Post 9/11 GI Bill Dependents of service members whose parent died in the line of duty after 9/10/11
Chapter 35=Dependents of a veteran who died or is permanently disabled because of a service-connected disability

Email Address: _____

Permanent Mailing Address: _____

Local Mailing Address _____

Current Phone# _____ Cell Phone # _____

Program Enrolled in: _____ Anticipated Graduation Date: _____

Courses are taught: ___ In Residence (UMC) ___ On Line Coursework

Repeating Courses: Yes No Course number and course title : _____

Number of hours you plan to take that count toward your degree:

Fall _____ Spring _____ Summer _____

STATEMENT OF UNDERSTANDING

Complete form with Veterans Course Approval worksheet & return to the VA Representative in the Office of Enrollment Management **each semester**. Failure to return forms will cause a delay in receiving my VA benefits. The VA will only pay for courses that apply toward my degree program. Reduction of my course load could affect my VA benefits by reducing or stopping benefits. I will be responsible for overpayments due to me not attending or reducing hours that I registered for.

Signature of Student

Date