

FINANCIAL AID VETERANS OFFICE 15800 S. State Street South Holland, IL 60473



Office: (708) 596-2000, ext. 2284

REQUEST FOR VETERAN BENEFITS

	Semester: FA	SF		SU				
				(YEA				
DD214 and VA Certificate	efits, you will need to complete this for or Letter of Eligibility for any giver ou have completed the required step.	n benefit	must be o	n file with the	e Financial <i>F</i>	Aid Veterans	Office. Please rea	
	Please complete this form in its	entiret	y and fill o	ut all inform	ation in bla	ack ink.		
Name: Last:	First:		MI:	SSC ID	#:	SS	N:	
	Primary Phone#	#:			Email:		@	
	Chapter 35. Only)	C:-				C	7:	
						_ State:	Zıp:	
Is this an address change	from what is on record for the V.	A.?	∐Yes	⊔No				
(If Yes, Please Contact The R	Regional Office in ST. Louis To Update	Your Re	cords)					
Academic Program:	tudent is receiving degree at a difformation and the definition of	many c	redit hou	rs are you re	equesting t	to be certifi	ed for?	
Other College Attended								
Is this the final semester of your degee/certificate program?					□Yes -or			
Please indicate the Feder	al and/or State benefit you are ut	ilizing:						
FEDERAL:								
☐ Chapter 33- Post☐ Chapter 35- Surv	eral Vocational Rehabilitation (Voc	al Assis	tance (VA	•	s)			
are paid directly to the st	ecipients: Ch. 30, Ch.35., and 1606 mu udent and not to South Suburban Co · behalf; If your benefit level is less tha	llege. PO	OST 9/11 (GI BILL® Recip	oients: VA b	enefits are p	aid directly to Sou	
	eran Grant) pays tuition and mand ional Guard Grant) pays tuition or	•	es; does n	ot cover lab	fee			

☐ MIA/POW Scholarship (Missing in Action, Prisoner of War) pays in-state tuition
PLEASE NOTE: Student is responsible for ALL fees not paid by IVG, ING and MIA/POW Scholarship

VETERAN STUDENT RESPONSIBILTY PAGE

IN ORDER TO CERTIFY CLASSES FOR VA EDUCATION BENEFITS. A COPY OF YOUR CURRENT SCHOOL SCHEDULE MUST BE ATTACHED WITH THIS FORM

Read the following statements carefully and initial each line item indicating you understand your responsibility as a student utilizing veterans' education benefits.

Please initial each line item to confirm your u	understanding:
	andard of Academic Progress. If I do not make satisfactory academic progress, my VA educatione met the requirements for reinstatement (Minimum G.P.A of 2.0)
I understand any course(s) that are not sp VA benefits	pecifically required for completion of my degree or certificate program cannot be certified for
I understand an Audited course cannot b	pe certified for VA benefits
I cannot use VA benefits for continuing e Benefits only)	education courses and/or any courses in which no credit is granted toward my degree. (Federal
I understand VA will be notified regarding	g any course in which a non-punitive grade is received (i.e. withdrawal)
I cannot receive VA benefits for repeating gram requirements (i.e. a higher grade is r	g a course after I have received a passing grade, unless the grade received does not meet pro- required for your major)
I understand I cannot use my VA benefits	s for remedial course taken online ex: MTH085, ENG097
	any amount that is not paid by veterans' education benefits (i.e. benefit level less than 100%) nt loan, I am ineligible to utilize IVG or ING
I understand I am responsible for ALL de	bts resulting from reductions or terminations of my enrollment (Post 9/11)
I understand if i do not request my benef	its <u>before</u> the tuition due date, I will be dropped for non-payment
Please initial each line item to confirm. I agre	ee to provide the following information to the School Certifying Official:
I must submit a Request for Veteran Bene	efits Form each semester and class schedule after I register for courses.
If I add, drop or withdraw from any or all	classes (Note: Veterans' change of enrollment form must be submitted to the Certifying Official)
If I change my degree major or program o	of study
My last date of attendance	
Any change to my address or phone num	ber
Receipt of a final grade that does not cou	int toward graduation for any course in which a grade of "I" (Incomplete) was initially assigned
Note: Any changes to your enrollment status	s will be updated with the VA.
used to process your claim for VA benefits ar	ce with Public Law 93-579, Privacy Act of 1974, the information furnished above will be not to provide information to all parties within the Office of Veterans Services as deemed losure of this information is voluntary and although no penalty will be imposed for non-in-receipt of benefits.
By signing this form, I acknowledge that I veterans' education benefits.	fully understand and agree to comply with my responsibility as a student receiving
SIGNATURE:	DATE: