

Military Benefit Enrollment Certification Request

First Name		Middle Name		Last Name	
Date of Birth	Social Security Number		Student I.D.		
Address			City	State	Zip Code
Home Phone Number		Cell Phone Number		Work Phone Number	
Whitecaps Email Address					

Please check one: I am the <input type="checkbox"/> Veteran <input type="checkbox"/> Veteran's Spouse <input type="checkbox"/> Veteran's Dependent <input type="checkbox"/> Active Duty
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My educational goal/major is: _____ Semester to be certified: _____

I am applying for benefits under:

- Chapter 30 - Montgomery GI Bill®
- Chapter 31 - Veterans Readiness and Employment
 - * Must provide VR&E Counselors Email:** _____
- Chapter 33 - Post 9/11 GI Bill®
 - *Percentage Rate:** _____ % **Estimated Remaining Entitlement:** _____
- Chapter 35 - Survivors' and Dependents' Educational Assistance
 - *Chapter 35 must provide your VA File Number:** _____
- Chapter 1606- Montgomery GI Bill® Selected Reserve
- Tuition Assistance

- Check one:
- New Student (First Semester in College)
 - Returning Student
 - Transfer Student Last College/University Attended:

Have you been awarded any scholarships that are to be used at Galveston College?

It is the policy of Galveston College to provide equal opportunities without regard to age, race color, religion, national origin, gender, disability, genetic information, or veteran status.



Yes No

Are you classified as an Out of State Resident? Yes No

*If yes, be sure to ask about the Intent to Make Texas Permanent Residence waiver.

Branch of Service: _____

Are you repeating any courses?

*If yes, please list the name of the course(s) and a brief statement as to why you are repeating.

Attach documents needed for processing, if applicable to the benefit you are requesting to be certified:

DD 214

Certificate of Eligibility

If you do not have a copy of your Certificate of Eligibility, you may ask the Financial Aid Office about a Tuition Deferment. Visit <https://gc.edu/financial-aid/tuition-deferment/> for more information.

List ALL educational institutions beyond high school you have attended (including Galveston College). If you have not attended other colleges, write NONE.

College or Institution Attended	Credit Hours	Dates Attended		Degree Received
		From	To	

_____ I am eligible to receive GI Bill® educational benefits and request Galveston College to certify my enrollment acceptable to my degree requirements.

_____ I understand that I am responsible for the cost of any courses that do not fall within my current degree plan.

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_____ I understand that I, the service member, must speak to my Education Service Officer (ESO) or counselor within my branch prior to enrolling at Galveston College.

_____ I understand that questions regarding my enrollment, financial aid, and/ or tuition assistance should first be directed to the Financial Aid and Veterans Affairs Assistant in the Financial Aid Department.

_____ I am not repeating any courses previously taken and completed except as permitted by V. A. regulations.

_____ I will notify Galveston College Financial Aid Office of any changes to my enrollment, address, status or major.

_____ I understand that all academic records and enrollment registration may be held if all financial obligations to the college are not settled in a timely manner;

_____ I understand that if I do not receive the education benefit checked above that I am still required to pay all tuition and fees to the IHE I am attending and withdrawal after the first day of classes does not eliminate this obligation.

_____ I have been advised regarding other websites that I may use to access financial aid information. Those websites are www.studentaid.gov, www.goarmyed.com, www.va.gov, www.tvc.texas.gov, and www.collegeforalltexas.com.

_____ I understand that if I am eligible for Dependent's Educational Assistance, Chapter 35, that the school will not be able to certify my enrollment without my VA File number issued to me by the Department of Veterans Affairs, or the veterans' social security number. This will delay processing of benefits.

_____ I am aware that some programs require additional requirements or conditions that are required to obtain professional credentials and/ or licensure necessary to be able to obtain employment in that field. Visit www.gc.edu, click on Current Catalog, in the Whitecaps Toolbox.

_____ I understand that I may contact the Financial Aid and Veterans Affairs Assistant for your questions regarding GI Bill®, scholarships, tuition assistance, student and private loans.

_____ I assume FULL responsibility for reimbursement of funds to Galveston College or the V. A., should an overpayment occur as a result of certifications. I understand that I am responsible for all charges not covered by the Veterans Affairs, or other veterans' benefits, such as but not limited to the Hazlewood Exemption.

_____ If I used my GI Bill® at another school, I understand that I am required to complete a VA Form 22-1995 online, if I am the veteran, a VA Form 22-5495 online for dependents/ spouse. These forms are to Request for Change Place of Program or Training.

Signature

Date