

Veteran Intent to Enroll Form

Instructions: This form must be submitted by the student upon registration each term for an enrollment certification to be submitted to the Department of Veterans Affairs.

SECTION 1: STUDENT INFORMATION

Student ID: _____

Full name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell phone: _____

YHC e-mail address: _____

Alternate e-mail address: _____

SECTION 2: BENEFITS INFORMATION

GI Bill Benefit eligible for (please check to specify):

Chapter 30 – Montgomery GI Bill Active Duty? Yes No

Chapter 31 – Vocational Rehabilitation (Voc Rehab)

Chapter 32 – Veterans Educational Assistance Program (VEAP)

Chapter 33 – Post 9/11 GI Bill Active Duty? Yes No

Chapter 35 – Dependents Educational Assistance (DEA), VA Claim No. _____

Chapter 1606 – Montgomery GI Bill-Selected Reserve

Chapter 1607 – MGIB-Reserve Educational Assistance Program (REAP)

SECTION 3: ACADEMIC INFORMATION

Degree Objective: Bachelor Master Doctoral Certification

Academic Major: _____ Change of major? Yes No

Academic Minor: _____ Change of minor? Yes No

NOTE: A degree plan for your current major must be on file in the Office of the Registrar (contact your academic advisor for more information). For a change of program or place of training, VA Form 22-1995 or 22-5495 must also be submitted prior to certification.

Semester(s) to be certified (check all that apply and indicate credit hours being taken in the space provided):

Spring, ___ Maymester, ___ Summer ___ Fall, ___

I intend to pursue the specified coursework as indicated above, and will notify the Office of the Registrar of any changes, including added or dropped courses, or withdrawal for the semester. I understand that this form must be submitted each semester prior to certification.

Signature: _____ Date: _____

Please return this form to the Office of the Registrar, P. O. Box 96, Young Harris, GA 30582.