



Veterans Request for Enrollment Certification

Complete only AFTER you have finalized your enrollment for the semester.

PTC ID or SSN: _____

Name: _____

E-mail Address: _____

Please be advised to update your contact information, including e-mail, with Student Records.

Veteran/Military Benefit Information

Which VA Education Benefit Program are you requesting to be certified under this semester?

- | | | |
|--|---|--|
| <input type="checkbox"/> Ch. 30 – Montgomery GI Bill | <input type="checkbox"/> Ch. 1606 – Reserve GI Bill | <input type="checkbox"/> Ch. 35 – Dependent/Spouse :
VA Claim/File #: _____ |
| <input type="checkbox"/> Ch. 33 – Post 9/11 | <input type="checkbox"/> Ch. 1607 – REAP | <input type="checkbox"/> Ch. 31 – Vocational Rehabilitation |

Term you are requesting benefits for (you must complete a separate form for each term).

- | | | | |
|-------------------------------|---------------------------------|---------------------------------|-------------|
| <input type="checkbox"/> Fall | <input type="checkbox"/> Spring | <input type="checkbox"/> Summer | Year: _____ |
|-------------------------------|---------------------------------|---------------------------------|-------------|

Piedmont Technical College Enrollment Information:

Check Appropriate Status:

- ☐ Piedmont Tech is the first school that I am claiming VA education benefits. I have completed a new application for VA Educational Benefits at www.gibill.va.gov. Print Copy and submit with this form.
- ☐ I received benefits at Piedmont Tech last semester or within the past year.
- ☐ I received benefits at another school. I must complete a Change of Program Form at www.gibill.va.gov and submit a copy of all of my previous transcripts to Piedmont Technical College.
- ☐ I am receiving a degree at another school. I have requested that the school send Piedmont Tech a Parent Letter so that I can be certified for this term. No certification will be submitted to the VA until this letter has been received.

Have you changed majors since your last VA enrollment certification?

☐ Yes ☐ No

Are you repeating any classes?

☐ Yes: Course: _____ ☐ No

Will you be graduating this term?

☐ Yes ☐ No

Please Read the following carefully before signing:

- I understand that I am responsible for paying any tuition and fees not paid by the V.A.
- I understand that I will receive benefits only for courses applying toward my program of study. Courses not listed as a requirement for program completion will not be certified and I will not receive benefits for them.
- Any change in status (dropping/adding courses, address & phone number changes, etc.) must be reported immediately to the Certifying Official. Changes in enrollment after certification may result in an underpayment or overpayment of benefits.
- I understand that after prior credit has been evaluated (military transcripts/prior college), any credit awarded for classes that I'm currently enrolled and certified for by the V.A. will be decertified, which may result in an overpayment of benefits.
- I understand that I am liable for any overpayments that I might receive from the V.A.
- I understand that any unsatisfactory progress will be reported to the V.A.
- I understand that the VA calculates my monthly payment based on the courses that I am enrolled for at any one time. For classes that do not last the entire term, I only receive payment while the class is in session.
- I understand that I must submit official college and military transcripts within two semesters of my initial enrollment.
- I understand that I must fill out this form and submit a copy of my schedule to the VA certifying official each semester after registering for classes.

Student Signature _____

Date _____