

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

SEMESTER ENROLLING IN: \_\_\_\_\_ EXPECTED GRAD DATE: \_\_\_\_\_

GI BILL CHAPTER: (CHECK ONE)     30     31     32     33 (Post9/11)     35     1606

ADDRESS: \_\_\_\_\_

IS THIS A CHANGE OF ADDRESS FROM WHAT THE VA HAS ON FILE?     YES     NO

MAJOR: \_\_\_\_\_ MINOR: \_\_\_\_\_

HAVE YOU CHANGED YOUR MAJOR?     YES     NO  
(IF YES, YOU ARE REQUIRED TO COMPLETE VA FORM 22-1995 IN OUR OFFICE)

**VERIFICATION OF ENROLLMENT:**

COURSE NAME	NUMBER	START DATE	END DATE	HOURS	GEN ED	MAJOR/ MINOR	REPEAT?	ONLINE/ HYBRID/ DISTANCE
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PLEASE READ AND SIGN BELOW:**

- ✓ THIS FORM IS TO BE COMPLETED AND TURNED IN **EACH SEMESTER** TO THE FINANCIAL AID OFFICE TO INSURE PROPER AND ACCURATE REPORTING TO THE REGIONAL VETERANS AFFAIRS (VA) OFFICE.
- ✓ THE VA WILL ONLY PAY PHYSICAL EDUCATION COURSES REQUIRED FOR GRADUATION BY YOUR MAJOR.
- ✓ ONLY IN RESIDENCE COURSES WILL BE CERTIFIED TO THE VA. ONLINE/HYBRID/INDEPENDENT STUDY MAY NOT QUALIFY.
- ✓ REPEATING COURSES IS ONLY PAID FOR BY THE VA IN THE EVENT THAT A PASSING GRADE WAS NOT RECEIVED OR THAT A "C" OF BETTER IS REQUIRED FOR YOUR MAJOR.
- ✓ ANY CHANGES TO THIS SCHEDULE NEED TO BE REPORTED **WITHIN THREE WORKING DAYS** TO THE FINANCIAL AID OFFICE TO PREVENT OVERPAYMENT OR UNDERPAYMENT OF BENEFITS.
- ✓ ANY QUESTIONS CAN BE DIRECTED TO THE FINANCIAL AID OFFICE AT 478-757-5205 OR THE REGIONAL VA OFFICE AT 1-888-442-4551.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ADVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

REGISTRAR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_