



2009-2010 Verification of Veterans Benefits

Student's Name _____ **Student ID#:** _____

You indicated on the Free Application for Federal Student Aid that you would be receiving some form of Veterans Benefits for the academic year 2009-2010. Please verify this information below. Since this data directly affects your financial aid package, it is your responsibility to provide updated and accurate information to this office.

- Check here if you will not be receiving Veterans Benefits for the 2009-2010 academic year.
- Period for which Veteran's Benefits will be received (check all that apply):
_____ Fall Semester, 2009 _____ Spring Semester, 2010 _____ Summer Semester, 2010

Total number of month's benefits will be received during above period(s) _____

- Projected Enrollment Status (fill in all semesters that apply):

Fall: _____ credits

Spring: _____ credits

Summer: _____ credits

- Benefit amount and/or type (based on Enrollment Status above) (check all that apply):

G. I. Bill (Chapter 30) \$ _____ /month

Post – 9/11 G. I. Bill (Chapter 33): Indicate the % of the tuition _____ %
benefit you will receive. Monthly Housing Benefit assumed at \$1,737/month.

Dependent Educational Assistance Programs (Chapter 34 & 35) \$ _____ /month

VA Contributory Benefits (VEAP)
(Include both government and student portions) \$ _____ /month

Vocational Rehabilitation Educational Assistance
Benefits (chapter 31) \$ _____ /month

Other (i.e. Death Pensions, Dependency and Indemnity
Compensation (DEC), Spouse's G.I. Bill,
National Guard Stipends, etc.)

Are you eligible for tuition, fees and book allowance? _____ yes _____ no

Student Signature

Date