**West Liberty University**

**Veterans Certification Request Form**

You must be **registered** for the term prior to processing certification.

**I will certify only on the basis of the information you provide.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME: | |  | | | STUDENT ID: | | | |  | |
| SSN: |  | | | | PHONE: | |  | | | |
| ADDRESS: | | |  | | EMAIL: |  | | | | |
| MAJOR (List current major, if major has changed see below) | | | |  | | | | EXPECTED GRAD DATE: | |  |
| ***If this is a change in Program (Major) or you transferred benefits from another institution you must  complete a Change of Program Form 22-1995 online at*** [***www.gibill.va.gov***](http://www.gibill.va.gov) ***and give Certifying Official a copy.*** | | | | | | | | | | |

**Veteran Benefit Information:**  **Are you a: Do you receive:**

Please indicate benefit: (Check One)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Chapter 30 Current/Former Active Duty |  | Veteran |  | GoArmyEd |
|  |  |  |  |  |  |
|  | Chapter 31 Vocational Rehabilitation & Employment Program |  | Active Duty |  | ROTC Scholarship |
|  |  |  |  |  |  |
|  | Chapter 33 NEW Post 9/11 GI Bill |  | National Guard |  | Guard Tuition Assistance |
|  |  |  |  |  |  |
|  | Chapter 35 Survivors’ & Dependents’ Educational Assistance |  | Reservist |  | Financial Aid |
|  |  |  |  |  |  |
|  | Chapter 1606 Montgomery GI Bill-Selected Reserve |  | Dependent/Spouse of Veteran |  | Other |
|  |  |  |  |  |  |
|  | Chapter 1607 Reserve Educational Assistance Program (REAP) |  |  |  |  |
|  |  |  |  |  |  |
|  | VRAP Veterans Retraining Assistance Program |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| List the hours you are expected to take for **SUMMER TERMS 2016** | | | |  | List the hours you are expected to take for **FALL 2016** | | |
|  | HOURS for Summer Term I | (May 09 – May 27) |  | |  | **HOURS for FALL Semester 2016** |
|  | HOURS for Summer Term II | (May 31– June 17) |  | |  | **HOURS for SPRING Semester 2017** |
|  | HOURS for Summer Term III | (June 20 – July 08) |  | |  |  |
|  | HOURS for Summer Term IV | (July 11 – July 29) |  | |  |  |

I understand that any changes in the educational status (drop in credit hours, change of program or major, grade changes, withdrawal or retroactive withdrawals from school) may cause overpayments that will be due from the veteran. Failure to report changes could jeopardize future enrollment certifications. Please keep in mind that non-punitive grades such as **“N”, “W”, “WP” AND “X”** are not acceptable to the Veterans Administration for payments of benefits. **It is the student’s responsibility for reporting changes in his or her enrollment to the certifying official and to the VA. Therefore, it is extremely important that you do not withdraw from classes if your course load will be reduced to below the level for which you were certified.** If you withdraw from courses and received the grades listed above, the VA will consider you as being overpaid for the entire semester unless you can prove to them that there were mitigating circumstances. I understand that I am **NOT** eligible for any payments under any VA programs for credit hours not required for my degree program. **If you want any Military credit it is your responsibility to obtain an Official Military Transcript and submit to our office for review.**

This is to certify that I have read the above information.

**You are also verifying you are not receiving any federal tuition assistance.**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Student’s Signature** **Date**

Cheryl Mielke, Veterans Certifying Official mielkec@westliberty.edu

West Liberty University Office: 866-937-8542

208 University Drive Office: 304-336-8129

College Union Box 145 Fax: 304-336-8220

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