



Request for VA Educational Benefits

Name: _____ SSN/VA File Number _____

Chapter: _____ Student SCC ID: _____

Please certify me for the semester that is checked below. If I drop or add classes, during this semester, I need to inform the VA Office at SCC. I understand that if I drop and have extenuating circumstances, I **must** notify the VA office at SCC at time of drop. If I do not officially withdraw but stop attending classes during the semester then my last date of attendance will be submitted to VA. I understand that if I do not complete my course, I could owe monies back to VA.

I will also inform the VA Office of any address or phone number changes.

Only check one semester. This will need to be signed every semester.

_____ Fall 2025

_____ Spring 2026

_____ Summer 2027

IT IS MY RESPONSIBILITY TO COME BY THE VA OFFICE EVERY SEMESTER AND SIGN THE REQUEST TO CERTIFY. I UNDERSTAND THAT IF I DO NOT SIGN MY BAH WILL BE LATE. FOR CH 33 TUITION MONIES AND BOOK ALLOWANCE WILL ALSO BE LATE

Signature

Date

Kathy Payne
VA Coordinator
592-4807

Ladda Koulavongsa
VA Counselor
592-4446

___1. Tell VA Counselor if you drop or change programs.

___2. I know if I walk away and stop attending classes, I will be dropped as of the last date of actual attendance (could owe the school tuition monies, Chapter 33 and VA BAH monies)

___3. I understand (if Chapter 33) that my tuition will not be reported till after 100% drop/add period for each enrollment period. The money will not be seen on students' account till we receive money from VA. The system will use the funds awarded to you until the VA monies are received.