



CERTIFICATION REQUEST FOR VA EDUCATIONAL BENEFITS

SSN: _____ VA File No.: _____ SCC ID No.: _____

If different from SSN

NAME: _____

ADDRESS: _____

CITY, ST - ZIP: _____

A Check will be mailed to this address unless you have entered your Direct Deposit information in your VA paperwork.

e-MAIL: _____

HOME PHONE No.: _____ WORK PHONE No.: _____

BENEFIT SELECTION

I am eligible to receive VA Educational Benefits under the following program: (Check one only)

- _____ CHAPTER 30 Active Duty Educational Assistance Program
- _____ CHAPTER 31 Vocational Rehabilitation Program
- _____ CHAPTER 33 Post 9/11 Veteran's Education Assistance Act of 2008
- _____ CHAPTER 35 Dependent's Educational Assistance Program
- _____ CHAPTER 1606 Selected Reserve Educational Assistance Program

Unless you are receiving benefits under Chapter 31 or 33, you should be prepared to pay tuition, fees, book, and supply expenses at the time of registration; however, you may request Advanced Payment (see below).

ADVANCE PAYMENT

If you would like to request an Advance Payment, you must request the Advance Pay paperwork. Only students under Chapter 30 or Chapter 1606 are eligible for advanced payment. To qualify for advanced payment, the student must meet the following criteria:

1. The student cannot be enrolled for at least one full calendar month (30 days) prior to the first day of class, and;
2. Must be enrolled in at least an half-time status (6 credit hours minimum).
3. Must complete the Advanced Payment application (VA form 22-1999) at least 45 days prior to the first day of class.*
4. Must complete the admissions process at SCC, **which includes payment for all registered classes.**

* In order to complete the Advanced Payment application, the student is required to meet with a VA counselor.

*By requesting Advance Payment, I understand that if the Department of Veteran's Affairs processes my claim on time, the check will be mailed to SCC for disbursement at registration and that I must complete the registration process, including fee payment before receiving the Advanced Payment check. I understand that after I receive an Advanced Payment check, I will not receive another check until **2 months** after I begin classes. Please note that not all Advance Payment requests are processed by the Department of Veteran's Affairs in time for the beginning of the semester. If the check has not been received by the time payment is due, the student is responsible for payment.*

NOTE: Post 9/11 (Chapter 33) students are not eligible for the Advanced Payment.

Program of Study: _____

I will enroll beginning: FALL _____ SPRING _____ SUMMER _____ ACADEMIC YEAR _____

NOTE: IF YOU HAVE ATTENDED A PRIOR COLLEGE AND RECEIVED VA BENEFITS AT THAT COLLEGE, YOU MUST SUBMIT ALL COLLEGE TRANSCRIPTS TO SCC'S OFFICE OF ADMISSIONS FOR EVALUATION, EVEN IF YOU DO NOT WISH TO RECEIVE TRANSFER CREDIT. FAILURE TO SUBMIT ALL TRANSCRIPTS MAY RESULT IN A REPAYMENT OF PART OR ALL VA PAYMENTS.

I am requesting enrollment certification for VA Educational benefits for each semester I attend while enrolled at Spartanburg Community College. I understand that my enrollment will be certified for each semester of attendance until I rescind this request in writing. I also understand that if I am not enrolled for two consecutive semesters, I must re-apply for certification. I declare that the above statements are true and that I have complied with all VA certification requirements. I will also notify the Spartanburg Community College Veteran's Affairs office immediately of any change in my program of study or enrollment status (including the dropping of classes or withdrawal from the college).

SIGNATURE: _____ DATE: _____