

2010-11 Veterans' Educational Benefits Request Form

*Check here for Advance Payment Request: Advance Payment Request must be submitted in person at least thirty (30) days prior to the start of the semester.

Please print clearly.

Name: _____
Last First Middle

New Address: Yes No

Address: _____
Street and Number City State Zip Code

Social Security Number _____ V.A. File Number _____
(Chapter 35 ONLY)

E-Mail Address: _____ Telephone Number: _____

- Check one: Chapter 30 (Active Duty GI Bill — more than 3 years)
 Chapter 30 (Active Duty GI Bill — less than 3 years)
 Chapter 31 (Vocational Rehabilitation)
 Chapter 32 (V.E.A.P./Contributory)
 Chapter 33 (Post 9/11)
 Chapter 35 (Survivors and Dependents)
 Chapter 1606 (Reserves/National Guard GI Bill)
 Chapter 1607 (Reserves/National Guard GI Bill — Serving on Active Duty)
(_____ Number of years on Active Duty for 1607)

Are you receiving an Educational Bonus (Kicker): Yes/(list monthly \$_____) No
If yes, attach a copy of the kicker contract, if not already on file in the MATC Veterans' Affairs Office.

Major/Program _____ Did major change from last semester? _____
(If your program has changed you must complete and submit to our office form 22-1995.)

How many credits did you register for in Fall 2010?

- 12 or more
 9, 10, or 11
 6, 7, or 8

List number of credits less than 6: _____

Do you plan to graduate in Fall 2010? Yes No

How many credits do you plan to register for in Spring 2011?

- 12 or more
 9, 10, or 11
 6, 7, or 8

List number of credits less than 6: _____

Do you plan to graduate in Spring 2011? Yes No

*Advance payment is the amount payable for the first month or portion of the month the semester begins plus the amount payable for the following month.

Complete this section if this is the first time you are using your Veterans' Benefits at MATC.
List all other academic institutions attended.

1. _____
2. _____
3. _____

(If you have used your Veterans' Benefits at another school, you must complete and submit to our office form 22-1995.)

2010-11 Veterans' Benefits Payment Agreement

1. The payment of Veterans' Education Benefits requires a student to be admitted into a financial aid eligible program, enrolled and attending classes. An admitted student is one who has completed and submitted an Admissions application, paid any required fees (i.e., application fee, criminal background check fee if applicable to your program), submitted official high school transcripts (which are recognized by the college), military training for transfer credit/advance standing and have met the academic requirements to be admitted into your program by taking the Accuplacer test, if necessary. An enrolled student is one who has registered and attending classes.
2. If a student receiving VA benefits drops or adds courses or fails to reenroll in a semester for which certification was requested, it is that student's responsibility to notify the Veterans Certifying Official immediately. If such changes of course load or enrollment is not reported, the student will be required by law to refund the overpayment.
3. If a student is changing Programs, it is the student's responsibility to submit a Change of Program Form (veterans-22-1995, dependent/spouse-22-5495). This will be forwarded to the Veterans Office to keep your records updated.
4. All students are required to maintain an overall grade-point average of at least 2.0. Unsatisfactory progress will be reported to the VA and could result in the termination of veteran's educational and financial aid benefits. A veteran's educational benefits will be terminated due to non-attendance or non-participation in classes.
5. A veteran may be certified only for required courses and electives needed for their selected program as specified on the curriculum.
6. Advance Pay must be requested in writing at least thirty (30) days before registration for any given school semester.
7. Continuous Pay for intervals between semesters must be requested in writing at least 30 days before the first day of class and may not exceed a period of fifty-seven (57) days. Enrollment in consecutive terms where you receive continuous pay cannot be processed in advance pay.
8. The MGB recipient must verify his or her continuing enrollment on the last day of each month or within a week after by Internet Web: <http://www.gbill.va.gov.wave> or by phone: 1-877-823-2378.
9. If you have been awarded federal and state financial aid funds and are also receiving State Veterans Benefits, your financial aid award may have to be adjusted to comply with federal financial aid packaging guidelines to prevent an overaward. If you have been overawarded, changes will be made to your federal and state financial aid funds, regardless of whether the information received was inaccurate or unknown at the time you were awarded financial aid funds.

If you have been overawarded, you may become ineligible to receive any or all offered federal/state financial aid awards (such as grants, loans, and the federal work study program), and/or benefits you receive from other resources (including scholarships, tuition/service fee waivers, fellowships, internships, grants, etc.). If it is determined that you are ineligible to receive the federal/state financial aid that was offered to you, some or all of this federal/state financial aid will be reduced and/or cancelled to prevent an overaward. If the federal/state financial aid funds have already been disbursed into your MATC Student Account, once they are cancelled or reduced to prevent an overaward, you may owe a repayment to the school. Failure to repay these funds could result in your registration being cancelled, and/or a hold being put on your MATC Student Records which would prevent you from registering for classes and getting a copy of your transcripts.

ATTENTION: **ALL APPLICANTS** — Read and Sign

I certify that I am enrolled in the number of credits I have indicated. In the event of withdrawal or change in any program during the semester, I agree to report such fact to the MATC Veterans' Affairs Office.

I have read and understand the above. I further certify that the information provided on this form is true and accurate.

Signature: _____

Date: _____

Have you completed the 2010-11 Free Application for Federal Student Aid (FAFSA) so that you can be evaluated to receive Federal/State Financial Aid? Yes No