Semester/Year
Fall_____
Spring_____
Summer_____

4123 Woodland Drive
New Orleans, LA 70131-7399
(504) 398-2235 Fax (504) 392-9460
registrar@uhcno.edu

This form must be completed each semester you intend to use your benefits. Renewal is not automatic. The VA will notify you by email when our office submits your enrollment certification. Only eligible course you are registered for can be certified. Ineligible courses include courses not required for your degree, courses not approved by your advisor, and courses you have already received credit for.

Name: _____ **SSN#** _____
Last **Middle Initial** **First**

Address: _____
Street/PO Box **City** **State** **Zip Code**

Telephone #: _____ **Work #:**_____

Email Address: _____

Major: _____

VA Status: (please check one)

- ☐ **Dependent of Veteran (Chapter 35) VA File #** _____
- ☐ **Montgomery GI-Bill (Chapter 30 Veteran)**
- ☐ **Deployed Reservist (Chapter 1607)**
- ☐ **Post-9/11 (Chapter 33)**
- ☐ **Reservist/National Guard (Chapter 1606)**
- ☐ **VA Voc. Rehab. (Chapter 31)**
- ☐ **Currently Active Duty**

Chapter 30 and 1606 students must verify enrollment the last day of each month. Please call 1-877-823-2378 or log on to www.gibill.va.gov then WAVE.

Check current status that applies:

_____**New student never used benefits anywhere.** *(22-1990 (22-5490 for dependents) or Letter of Eligibility required)*

_____**Transfer student (used benefits at another school).** *(Must provide 22-1995 or 22-5495 for dependents)*

_____**Continuing student attended UHC last semester using VA benefits.**

_____ **Re-entry student, used VA benefits at UHC previously.**

_____ **Visiting student only** *(Must have letter from parent school)*

NOTE* *You must earn a Punitive (counts as earned credit) grade in a course in order for VA to pay you for it. Nonpunitive grades (do not affect GPA) such as W, X, WN or W + midterm grades must be reported to VA. If this changes your training time, it will result in an overpayment of benefits that VA will require you to repay.*

Please attach a current schedule

Payment may be received 4 to 12 weeks after certification is received by the Veterans' Regional Office. Information regarding payment status can be obtained by contacting the VA at 1-888-442-4551, eBenefits, or Wave portal.

I understand the above VA regulations and I understand that I can be charged an overpayment if I receive benefits I am not entitled to.
I understand that it is my responsibility to keep the Certifying Official notified of any change in my status. I realize that regular attendance of all classes is a requirement for VA payment. If I stop attending a class, I realize this is the same as withdrawing and I will notify the Certifying Official.
I do hereby grant authority to the VA Certifying Official to release information to the Veterans' Administration concerning my status as a VA student at UHC.

_____
(Signature of Student & Date)