

Fall

Email:_____

New Student - COE or VONAPP must be included

Benefit Recipient Information

Enrollment Term:

Address:_____

Student Status Continuing Student

Military Status

Veterans Educational Certification Request VA School Certifying Official-1530 Concordia West, Irvine, CA 92612-3203

Administration Building Room 203

@eagles.cui.edu

STATE

Phone:

Fax: 949-214-3124

Spring

Instructions: This form must be completed each semester that you want to use VA educational benefits at CUI. Submit completed form after you have officially registered for your courses. Certification of enrollment to the Department of Veteran's Affairs will not be submitted until this form is completed and returned to the School Certifying Official.

Summer

Last Name: ______ First Name: ______ ID: <u>E00</u>

Veteran	Active Duty	Reservist	Dependen	Ιτ					
VA Benefits									
Chapter 30: Montgomery GI Bill				Chapter 35: Dependents Educational Assistance: Payee #					
Chapter 31: Vocational Rehabilitation				Chapter 1606: Montgomery GI Bill-Reserves					
Chapter 33: Post 9/11 GI Bill			Chapte	Chapter 1607: REAP					
Branch of Sei	rvice								
Air Force	Army		Coast	t Guard	Navy	′			
Air National G	uard Army	National Guar	rd Marin	e Corps					
Enrollment In	formation								
		Only	courses listed	d on Grad	uation Pla	n can be certifi	ed.		
CRN Number	Course Nu	mber Num	ber of Units	Campus	or Online	Start and		d End Dates	
С	redit Hour 1	Γotal:							
Office Use On	ly								
	Res Hr:		Dist Hr:		Aid: ——	Tu	uition/F	ee: \$	