



VETERANS REQUEST FOR CERTIFICATION

Please return this form to the Morehead State University Veterans Certifying Official each term by email to s.crail@moreheadstate.edu, Mail to 201 Ginger Hall, Morehead, KY 40351, or fax to 606-783-9103.

I plan to attend Morehead State University for the Academic term indicated below, and request that my enrollment be certified with the Veterans Administration. I understand that filling out this form does not automatically certify me for VA benefits. Courses must be on your program evaluation and qualify under VA guidelines. (Refer to www.gibill.va.gov for any questions.) I also understand that all communication regarding this request for certification will be sent to my official MSU email Address.

Name _____ Student ID _____

Address _____ City _____ State _____ Zip _____

Phone (home) _____ (cell) _____

Is this an address change? Yes No

MY VETERAN'S STATUS IS: (please check the appropriate category)

- Ch. 30 – Montgomery G.I. Bill
- Ch. 31 – Vocational Rehabilitation
- Ch. 35 - Survivors & Dependents Assistance
- Ch. 1606 – Selected Reserve/National Guard
- Ch. 1607 – Reserve Educ. Assistance Program
- Ch. 33 - Post-9/11 G.I. Bill

Are you currently serving on active duty? Yes No

Degree you are pursuing: Associate Bachelor Masters

What is your major? _____

Have you recently changed your major? Yes No **(If yes, you will need to fill out a 22-1995.)**

Please check a location: MSU Morehead Campus MSU Extended Campus _____ Internet

Term	Course Number	Course Title	Is this a repeat class?

I understand that I must be registered for the class(es) listed above before my enrollment can be certified with the VA. It is my responsibility as a student receiving VA benefits to notify the Morehead State University Veterans Certifying Official if any change is made to the above class schedule. I will notify the Veterans Certifying Official if I add, drop, withdraw, or otherwise stop attending any class. I also understand that I must make satisfactory progress toward my educational goal and that the school will report to the VA any changes in my enrollment status or lack of academic progress.

Signature: _____ Date: _____