



1. Name: _____
Last First Middle Initial

2. Student M#: _____ 3. Social Security #: _____

4. MAJOR: _____

5. INDICATE YOUR STATUS: Undergraduate Graduate
 Freshman Sophomore Junior Senior

FOR OFFICE USE ONLY

CH: _____ %: _____

You must be in a degree-seeking curriculum to receive VA benefits. VA regulations support registration only for those courses listed in the college catalog as necessary for the completion of the curriculum that you have declared. Only those courses will be considered for payment of benefits. Any deviation from this regulation may constitute an overpayment and result in repayment or termination of benefits!

IF YOU ARE A NEW STUDENT OR IF ANY OF YOUR INFORMATION HAS CHANGED COMPLETE SECTIONS 6-12:

6. STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

7. E-MAIL ADDRESS: _____

8. HOME PHONE: (____) _____

9. MOBILE PHONE: (____) _____

10. Are you on **ACTIVE DUTY**? ____ If **YES**, be sure to submit a complete Application for VA Educational Benefits, which must be signed by your Education Service Officer.

11. Indicate the type of benefits that you will be receiving:

- Chapter 33 (Post 9/11 GI Bill)
- Chapter 30 (Prior Active Duty)
- Chapter 35 (Survivors' and Dependents' Disabled or Deceased Veterans)
- Chapter 31 (VA Vocational Rehab)
- Chapter 1606 (Reservist/National Guard)
- Chapter 1607 (Reservist/National Guard Mobilized to Active Duty)—(REAP)

12. **YOU MUST HAVE YOUR DD-214 AND YOUR TRANSCRIPTS FROM ANY PREVIOUS COLLEGES FORWARDED** to Maritime College for evaluation of transfer credit. Please send to the following address:

**OFFICE of Veterans Affairs
Maritime College
6 Pennyfield Ave
Throggs Neck, NY 10465**

NOTE: The Veterans Administration may delay payment of benefits pending receipt.

13. INDICATE YOUR STATUS WITH THE VA OFFICE:

- New Student (never used VA benefits) must complete an Application for VA Educational Benefits, which may be completed on-line at www.va.gov. Submit copies of your Application & DD form 214, plus your NOBE or Certificate of Eligibility with this form.
- Continuing Student (attended previous semester at Maritime College)
- Transfer Student (received VA benefits at another institution). Student must complete a Change of Program or Place of Training Form (VA form 22-1995 or 22-5495 for Ch 35 recipients), downloaded at www.va.gov.
- Returning VA Student (break in semester at Maritime College / DID NOT attend previous semester)
- Supplemental VA Student (taking classes to transfer to your primary college/school)
- Change in Student Status (Withdrawal – during or after drop period, Reduction/Increase, etc.)

COMPLETE REVERSE

NOTICE: THE VETERAN'S ADMINISTRATION REQUIRES THAT THE COLLEGE NOTIFY THEM IMMEDIATELY OF ALL CHANGES IN ENROLLMENT. CHANGES INCLUDE: ADD, DROP, AUDIT, OFFICIAL WITHDRAWAL, CHANGE IN TUITION/FEEES, AND CHANGES IN PROGRAM/PLACE OF TRAINING (CURRICULUM).

14. PLEASE LIST ALL COURSES FOR WHICH YOU ARE REGISTERED FOR THIS SEMESTER:

Semester & Year: _____
(Ex. Fall '13, Spring '14, Summer Ashore A/B '13, SST A/B '13)

Courses which meet less than 15 weeks (full-semester) are certified only for the time period during which they actually meet.		
Course Name (Ex. Fluid Mechanics)	Subject/Course # (Ex. MATH 101)	Course Type / Credit (Ex. Res / Online / Grad 1&2)
Total Credit Hours		

NOTE: Deferments will ONLY be given to qualified VA students. Students requesting a deferment must provide Proof of Eligibility (Certificate of Eligibility) from the Department of Veterans Affairs & a copy of your bill.

15. I understand that I must complete this school form every semester/mod so that I may be certified with the Veterans Administration. I further understand that any information on this form or in my College file may be shared with the VA at their request.

Signature of Claimant Date Staff Initials

- Please submit every semester along with a copy of your schedule.
- If there is any change in your status (i.e. Full to ¾ or ½ time or drop of health insurance), please submit supporting documents to the Office Of Veterans Affairs, to avoid liability of overpayment.