

MISSISSIPPI STATE UNIVERSITY
Center for America's Veterans
Verification of Enrollment for VA Educational Benefits

Name: _____ DATE of BIRTH: _____
Last First MI

Address: _____ MSU ID #: _____
 _____ S.S. #: _____

Home phone #: _____ Local phone #: _____ E-mail: _____

Branch of Service: _____ Residency Classification: In State _____ Out of State _____

VA Education Benefit Information: (Check One)

- Montgomery GI Bill (Chapter 30) Vocational Rehabilitation (Chapter 31) Old GI Bill (Chapter 34/30)
 Currently on Active Duty Post 9/11 GI Bill Chapter 33
 Montgomery GI Bill-Selected Reserve (Chapter 1606) Reserves or Nat'l Guard REAP (Chapter 1607) Activated Reserves or Nat'l Guard under Title 10 Contingency Operations VEAP (Chapter 32)
 Chapter 33 Dependent Transferability Dependent (Chapter 35) VA File #: _____

Academic Information:

Have you attended MSU before? YES () NO () Last term & year attended: _____

Have you attended another institution since your last term at MSU, or are you a transfer student from another institution? YES () NO () School: _____

Did you receive VA benefits at the previous institution? Yes () No ()

Current Degree Program: _____

Term of Enrollment: _____ 20____ Expected Graduation Date: _____

Course for Term:

Course Name	Course #	Credit Hours

Course Name	Course #	Credit Hours

Total Number of Credit Hours for this Term: _____

VA EDUCATION BENEFITS ARE ONLY PAID FOR COURSES REQUIRED FOR YOUR DEGREE.

STUDENT SIGNATURE: _____ **DATE:** _____

ADVISOR OR DEPARTMENT HEAD SIGNATURE: _____ **DATE:** _____

Please return to: Melanie Owens, Veterans Administration Supervisor, 126 Magruder St., P. O. Drawer 6283, Mississippi State, MS 39762, Mail Stop: 9756.
 PHONE: (662) 325-2024, FAX: (662) 325-6723, e-mail: mowens@saffairs.msstate.edu.

The Department of Veterans Affairs uses social security numbers to determine eligibility of veterans' educational benefits. (38 U.S.C. 3471) Title 38, United States Code allows us to ask for this information.

For Office Use Only Yellow Ribbon Program	
Participate # _____	Unmet Amount: _____
Total Amount: _____	MSU Amount: _____
VA Amount: _____	

For Official Use Only FTA, Reserve TA, SEAP	
Semester: _____	Type: _____
Amount: _____	