Use Black Ink MSU Cente	er for America'	s Veterans Military Benefit	ts Form	
ALLOW 2 BUSINESS DAYS (48 HOURS) For T ***Incomplete Form/s WILL BE RETU		emoved After Our Office Receives Your C and VET HOLD WILL REMAIN on your acco		-
New Student: Current Student:	Last term benefi	its requested: Enro	lling in # of Credit	Hours
Using One Military Benefits Fe	orm Per Each Te	erm/Semester You Are Reque	sting Benefits	For:
FallYear Spring ONLY	Year Spri	ng AND Winter Year	SummerYe	ear
Student Information:				
Last Name:	First Name:		M.I.:	_ DOB:
Mailing Address:		City:		Zip:
Cell Phone #:	MSU ID#:	MSU Email:		@msstate.edu
Are you a Mississippi Resident? Yes	No	Are you a Dependent	Service-mem	ber(SM-See next line)
Active Duty Reserve Branch of Service	2	Air National Guard	National Guard	NG State:
Academic Information:				
Degree:		Major:		
*** PLEASE NOTE**** Intermediate/Rer	medial classes may	v not be taken Online through dista	ance education.	Must be in person.
Are you Graduating this term? Yes	No	If no, anticipated graduation dat	te:	
Military Benefit Information:				
**Schedule Changes may result in	n a debt to MSU a	or VA that you are responsible t	o pav** Initial	Here:
Chapter 33 TEB – For Dependents				
		100% total/permanent service-related		due to this disability
List Sponsor's name: First		-	-	-
Chapter 31 Veterans Readiness	s and Employmer	۱۲ – (FORMERLY KNOWN AS VOCATIONAL REHABILI	ATION)	
VR&E Counselor Email:		Telephone Nu	umber:	
		hapter 30, and Chapter 33		
Select Type of Military Benefit/s - Num	ber of TA if requ	esting (from 0 to 16) - If Applical	ble Chapter 160	6 or 33 SM GI Bill®
GI Bill® ONLY TA Only GI	Bill®&TA GI Bi	ill® & SEAP & TAGI Bill® & SEAP	SEAP Only	y # TA Hours
Request TA through your Branch of Service website — Clie				
Chapter 1606 Selected Reserve	e – NEVER BEEN DEP	LOYED *		
Chapter 30 Active Duty – Service	e Member that is/was a	Active Duty - Chp 30 AD Requesting Top U	IP?Yes	No
Chapter 33 Service-Member-is/v	was Active Duty or Res	erves or National Guard Been Deployed $^{m{\star}}$		
Duty Station:	Active	Duty: Civilian Employee:	_ Retired:	Dependent:
Type In Your Name or Sign:				
STUDENT SIGNATURE:	completed	Militan, Ronafita Form	DATE:	
Emailing to: VETERANS@MSSTATE.	EDU or Fax to 66	2.325.6723 or Hand Carry to 250	D Bailey Howell	Drive ~ Nusz Hall

For questions or concerns please call 662-325-6719 and ask for the School Certifying Official that handles your benefit