

GI Bill Certification Request Form



ALL STUDENTS utilizing Veterans Educational benefits MUST complete this form <u>each semester</u> AFTER registering for classes. You should register as soon as possible and complete this certification request.

NOTE

UTSA processing time takes 15-30 business days depending on the volume of certification requests we have received. Please visit www.utsa.edu/vma for more information regarding priority certification deadlines.

Please initial to acknowledge the following:

I have visited to familiarize myself with the certification process at UTSA

I am eligible to receive VA Educational Benefits

I have visited https://inquiry.vba.va.gov/weamspub/buildSearchInstitutionCriteria.do to verify that my program of study has been approved by the VA

I have verified that all of the courses I am requesting certification for are listed on my approved degree plan or I have written notice from my advisor approving a course not listed on my degree plan

I understand that the VA may not cover repeated courses in some cases and have visited https://www.benefits.va.gov/gibill/ to learn about my specific eligibility

I will notify the UTSA Veteran Certification Office of any changes to my enrollment and understand that any changes will be reported to the VA after census date

I understand that I am responsible for any tuition and fees not covered by my GI Bill benefits

I understand that if I make a change after my initial certification, it may cause a debt with the VA or UTSA that I may be responsible for

I understand that if I am attending multiple schools during the same semester I must provide my course schedule to my parent school for approval, and must supply a parent institution letter to my guest school to certify for the term

I understand that all contact information must be updated through <u>ASAP</u> in order to supply updates with the VA (All preferred contact information will be submitted to the VA)

	myUTSA II	(abc123)				
First Name		MI	Last Name			
Undergraduate	Gra	duate	Certificate Prog	Certificate Program		
Which term are you applying for	? Fall	Spring	Summer	Year	Year	
Which Benefit are you using?						
CH33 Post 9/11 (veteran)		CH33 Post 9/11 (family member)		CH30 N	MGIB	
CH 35 (DEA)	CH1606 Res	I1606 Reserves C		CH1607 REAP		
Chapter 35 only) Veteran's Social Security #		•	tend to use the Hazl se submit a separate			•
Are you on active duty? Yes	No Are	you running out	of benefits this term?	Yes	No	
Are you receiving DoD tuition as	sistance? Y	es No				
I am requesting certification for t beginning of this form:	he semester ind	icted above, and o	certify that I have con	npleted all	of the acknow	ledgements at the
Signature (full name)			Date			
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With a few exceptions, you are entitled, on your request, to be informed about the information U.T. San Antonio collects about you, under Sections 552.021 and 552.023 of the Texas Government Code. Under Section 559.004 of the Texas Government Code, you are entitled to have U.T. San Antonio correct information about you that is held by us and that is incorrect, in accordance with the procedures set forth in the University of Texas System Business Procedures Memorandum 32. Disclosure of your social security number (SSN) is requested from you in order for The University of Texas at San Antonio to access your student records. No statute or other authority requires that you disclose your SSN for that purpose. Failure to provide your SSN, however, may result in a delay in accessing your student record. Further disclosure of your SSN is governed by the Public Information Act (Chapter 552 of the Texas Government Code) and other applicable law.