

Request for Veteran Enrollment Certification

Complete this form and return to OCPE VA School Certifying Official Fran Koppell:
koppell@njaes.rutgers.edu.

First Name: _____

Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____ Social Security Number: _____

Please select the educational benefits you are claiming:

- Chapter 30 Montgomery GI Bill®
- Chapter 31 Vocational Rehabilitation
- Chapter 33 Post 9/11 (_____%)
- Chapter 35 Survivors & Dependents

For Chapter 35 dependents' educational assistance, please include the following:

Name of Veteran: _____

VA File Number or Veteran's Social Security Number: _____

Please indicate your anticipated enrollment for the following class (one form per class).

Class Name: _____

Class Date: _____ Tuition: _____

By signing this form, you acknowledge it is your responsibility to inform the Registrar's Office of changes to your enrollment. If found ineligible for VA benefits, you will be responsible for tuition and fees. Please note that VA benefits apply only to required courses taken and completed satisfactorily for an approved program

Signature: _____

Date: _____