

Student Information Sheet – GI Bill

Name(+maiden) _____ Phone# _____

VA File#(Usually SSN) _____ Student ID# _____

Mailing Address _____

The VA may use this address to contact you

Email _____ Branch of Svc.(optional) _____ Unit _____

Email is our preferred method of contact

Residency Status (in-state, out-of-state, WUE, etc.) _____

- You must apply @ www.gibill.va.gov in order to start your benefits – this is a one-time application.
- This Student Info Sheet allows me to know that you will be using benefits – this form is updated annually.
- If you have used benefits before at a different school or changed your major, fill out a VA Form 22-1995 (or Form 22-5495 for Ch. 35) before your benefits can be processed – turn this into my office.

Circle Your Current Status(es):

Which GI Bill do you use? (Check box):

Veteran Active Guard Reserve Dependent Spouse

Chapter 30, (Active Duty) – **How many years?** _____

Chapter 33, (Post 9/11, Fry) – **What %?** _____

Do you have any kickers? **Y / N**

Chapter 1606, (no active service) **Guard or Reserve.**

If yes, how much per month? _____

Chapter 31, (VocRehab) - You must contact counselor

Chapter 1607, (REAP) **Guard or Reserve**

Do you receive any Tuition Assistance from your

Chapter 35, (DEA) **Survivor or Dependent?**

Active Duty, Guard, Reserve Unit? **Y / N**

Other: (MYCAA, Free Tuition, etc.) _____

Will you be on Active Duty during term? **Y / N**

Anticipated Enrollment at USD

Expected Graduation (MM/YY) _____ Degree Sought _____ Major _____

Spring 2012 Intended credit hours _____

Summer 2012 Intended credit hours _____

Will you be taking any online classes? _____

Fall 2012 Intended credit hours _____

Will you take classes @ other schools? _____

Spring 2013 Intended credit hours _____

---If yes, you must notify our office each term!

I hereby acknowledge that I will notify Veterans' Services of all courses I take that do not satisfy a requirement in my degree program since the VA will not pay for these classes (ex. extra electives, repeating a passed course). If I drop, add, or withdrawal from a class I must inform Vet's office to avoid any overpayments or non-payments. All benefits other than Tuition & Fees will be paid directly to me.
I have read and understand all of the above information and have received a copy of the New Student Counseling Form:

Signature _____ Date _____

Return to Veteran's Services, Office of the Registrar, Belbas 212. Once submitted by the certifying official to the VA, first time education benefits will be processed in 6-12 weeks, recurring benefits may be processed sooner.

OFFICE USE ONLY: Is student coded? _____ Is Cert Completed? SU? _____ FA? _____ SP? _____