



Dorothy Stratton Veteran
and Military Success Center

Veteran Request for Enrollment Certification (VREC)

Full Name: _____ **PUID:** _____ **Email:** _____

Term: ____ Fall ____ Winter ____ Spring ____ Summer **Year:** 20____

Location: ____ West Lafayette ____ Indy ____ PPI (Location: _____)

VA Education Benefit (Select One):

____ **Ch. 33** (Post 9/11 GI Bill)

____ **Ch. 31** (VR&E) - Counselor Email: _____

____ **Ch. 30** (Montgomery GI Bill - Active Duty)

____ **Ch. 1606** (Montgomery GI Bill - Reserve/National Guard)

____ **Ch. 35** (DEA - Spouse/Dependent)

1. **Degree Objective:** (e.g., BS, MS, PhD) _____ **Major:** _____
2. **Credit Hours Enrolled:** _____ (Only courses applying to your degree objective can be certified)
3. **Is this your first time using this benefit at Purdue?** ____ Yes ____ No
4. **Have you changed majors since your last certification?** ____ Yes ____ No
5. Are you repeating any classes? ____ Yes, ____ No (If yes, which? _____)
6. Are **ALL** courses fully online? ____ Yes ____ No
7. Are you attending any courses away from the Purdue WL campus? ____ Yes ____ No

I UNDERSTAND THAT I MUST NOTIFY THE SCHOOL CERTIFYING OFFICIAL OF ANY CHANGES IN MY REGISTRATION. Change in course enrollment after certification has been submitted to the VA may result in the retroactive loss of benefits unless the VA finds mitigating circumstances involved in the change. Loss of benefits could revert back to the first day of class. **Please initial next to each statement.**

____ **I AM AWARE THAT I MUST FILL OUT THIS FORM EACH SEMESTER AFTER REGISTERING FOR CLASSES.** I understand that even though I am eligible for GI Bill benefits, I AM RESPONSIBLE FOR ENSURING THAT MY TUITION/FEES ARE PAID TO THE UNIVERSITY AND ANY MONIES LEFT UNPAID BY THE VA BECOME MY RESPONSIBILITY.

____ **I AM AWARE THAT CHANGES IN MY REGISTRATION MAY ALTER THE PAYMENT THE VA WILL AWARD ME.**

____ **I UNDERSTAND THAT I WILL BE LIABLE FOR ANY OVERPAYMENT I MIGHT RECEIVE FROM THE VA.**

____ **I acknowledge that I am primarily responsible for requesting my own military transcript and submitting it to the Office of Admissions for credit evaluation. In the event that I am unable to successfully complete this task, I grant Purdue University permission to request my transcript through the Joint Services Transcript (JST) portal on my behalf as an emergency alternative. Attention Air Force Servicemembers: You must obtain your transcript directly through the Community College of the Air Force (CCAF) and submit it to the Office of Admissions. Failure to complete this step could negatively affect your ability to receive GI Bill funding.**

Purdue is compliant with Veterans Benefits and Transition Act of 2018- Title 38 USC 3679(e)- This allows an individual to attend or participate in a program of education if the individual provides the school with a "Certificate of Eligibility (COE)" *VA policy requirement is available here: https://benefits.va.gov/gibill/fgib/transition_act.asp, Purdue policy can be reviewed here: www.purdue.edu/veterans and on the VMSC Student Checklist

I HEREBY CERTIFY THAT ALL STATEMENTS ARE TRUE & COMPLETE TO THE BEST OF MY KNOWLEDGE & BELIEF.

Signature: _____ **Date:** _____