



# EL CAMINO COLLEGE VETERANS SERVICES PROGRAM REQUEST FOR VA BENEFIT CERTIFICATION

**PLEASE PRINT**

|               |  |                                    |  |
|---------------|--|------------------------------------|--|
| <b>NAME:</b>  |  | <b>STUDENT ID:</b>                 |  |
| <b>SSN:</b>   |  | <b>FILE #</b> For Chapter 35 only: |  |
| <b>PHONE:</b> |  | <b>EMAIL:</b>                      |  |

I AM PLANNING TO ATTEND ECC/ECC COMPTON CENTER IN THE: **FALL**    **SPRING**    **SUMMER**    **WINTER**    YEAR: \_\_\_\_\_

**PLEASE LIST ALL COLLEGES, INSTITUTIONS AND MILITARY SCHOOLS ATTENDED** (IF NONE, WRITE "NONE")

| NAME OF SCHOOL    | LAST DATE ATTENDED | UNITS COMPLETED |
|-------------------|--------------------|-----------------|
| El Camino College |                    |                 |
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| <p>Please answer the following:</p> <p><b>Military Status Self or Dependent</b></p> <ul style="list-style-type: none"> <li>I am a Veteran</li> <li>I am currently on Active Duty</li> <li>I am a member of the Active Reserve</li> <li>I am a member of the National Guard</li> <li>Parent/Guardian is a Veteran</li> <li>Parent/Guardian is on Active Duty</li> <li>Parent/Guardian is on Active Reserve</li> <li>Parent/Guardian is on the National Guard</li> <li>Spouse is a Veteran</li> <li>Spouse is on Active Duty</li> <li>Spouse is on Active Reserve</li> <li>Spouse is on National Guard</li> </ul> <p><b>Branch of Service:</b> _____</p> | <p>Please check one:</p> <p><b>I AM REQUESTING TO RECEIVE BENEFITS UNDER:</b></p> <ul style="list-style-type: none"> <li><b>CHAPTER 30</b> Montgomery GI BILL®</li> <li><b>CHAPTER 31</b> Vocational Rehabilitation</li> <li><b>CHAPTER 32</b> VEAP</li> <li><b>CHAPTER 1606</b> Selected Reserve</li> <li><b>CHAPTER 1607</b> Reserve Educational Assistance Program (REAP)</li> <li><b>CHAPTER 35</b> Dependent/Survivor</li> <li><b>CHAPTER 33</b> Post 9/11 GI BILL®</li> <li><b>CHAPTER 33</b> Transfer of Benefits (Spouse/Child)</li> </ul> <p><small>GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at <a href="http://www.benefits.va.gov/gibill">www.benefits.va.gov/gibill</a></small></p> |
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I request that El Camino College Veterans Office submit the appropriate forms to the U.S. Department of Veterans Affairs (VA) so I may receive my VA Education Benefits. I also give El Camino College Veterans Office permission to notify the VA of any changes in my unit status or withdrawal from school and to furnish other information requested by the VA.

I understand that I am responsible for notifying the El Camino College Veterans Office of any changes in my class schedule or attendance.

**Chapter 33 (Post 9/11) Recipients:** *You are responsible for all debts resulting from reductions or terminations of your enrollment, even if the payment was submitted directly to the school on your behalf. The VA will not pay for courses you don't attend, courses from which you withdraw, or courses you completed but received a grade which will not count towards graduation.*

**I realize that I may lose my VA Education Benefits if my GPA falls below 2.00 for two consecutive semesters or more.**

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Signature of Student Date