



VETERANS SERVICES - STUDENT INTAKE FORM

NAME:		STUDENT ID:
SSN:	DATE OF BIRTH:	FILE # For Chapter 35 only:
PHONE:	E-MAIL:	

I AM PLANNING TO ATTEND EL CAMINO COLLEGE IN: **SPRING** **SUMMER** **FALL** **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		

<p>Please answer the following:</p> <p>Military Status Self or Dependent (Mark one):</p> <p> <input type="checkbox"/> I am a Veteran <input type="checkbox"/> I am currently on Active Duty <input type="checkbox"/> I am a member of the Active Reserve <input type="checkbox"/> I am a member of the National Guard <input type="checkbox"/> Parent/Guardian is a Veteran <input type="checkbox"/> Parent/Guardian is on Active Duty <input type="checkbox"/> Parent/Guardian is on Active Reserve <input type="checkbox"/> Parent/Guardian is on the National Guard <input type="checkbox"/> Spouse is a Veteran <input type="checkbox"/> Spouse is on Active Duty <input type="checkbox"/> Spouse is on Active Reserve <input type="checkbox"/> Spouse is on National Guard </p> <p>Branch of Service: _____</p>	<p>Please check one:</p> <p>I WILL BE USING VA EDUCATION BENEFITS UNDER (Mark one):</p> <p> <input type="checkbox"/> CHAPTER 33 Post 9/11 GI BILL® <input type="checkbox"/> CHAPTER 33 Transfer of Entitlement (TOE) (Spouse/Child) <input type="checkbox"/> CHAPTER 33 Fry Scholarship (Spouse/Child) <input type="checkbox"/> CHAPTER 31 Veterans Readiness and Employment (VR&E) <input type="checkbox"/> CHAPTER 1606 Montgomery GI BILL® Selected Reserve <input type="checkbox"/> CHAPTER 30 Montgomery GI BILL® <input type="checkbox"/> CHAPTER 35 Dependents Educational Assistance Program (DEA) </p> <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 www.benefits.va.gov/gibill</small></p>
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- I request that El Camino College Veterans Services submit the appropriate forms to the VA so I may receive my VA Education Benefits. I also give El Camino College Veterans Services 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 Services of any changes in my class schedule or attendance.
- For **Chapter 33 Post 9/11 GI BILL®** recipients; I am responsible for all debts resulting from reductions or terminations of my enrollment, even if the payment was submitted directly to the school on my behalf, and hat the VA will not pay for courses I did not attend, courses from which I withdraw, or courses I completed but received a grade which will not count towards my graduation.
- I realize that I may lose my VA Education Benefits if my GPA falls below 2.00 for two consecutive semesters or more.

_____ Student's Signature	_____ Date
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