

## **Enrollment Certification Request for Military Education Benefits**

Please complete this form and submit with a copy of your Certificate of Eligibility from the U.S. Department of Veterans Affairs to the:

Office of Student Accounts Phone: 800.595.6938 option 2,3 Fax: 312.488.6336 Email: <u>militarybenefits@thechicagoschool.edu</u> Website: <u>www.thechicagoschool.edu</u>

By submitting this information, you are informing The Chicago School of Professional Psychology of when to start certifying your enrollment to the VA. The Chicago School will continue to certify your enrollment with the VA as long as your student status remains active and you are eligible for benefits. For more information, see our web site: <u>https://www.thechicagoschool.edu/why-us/service-members-veterans-dependents/</u>

Last Name:	First Name:	Middle Nar		ne:	Other Names:
Address, City, State, Zip:					
Email: Phone:					
Type of benefit: Ch. 30 (MGIB) Ch. 1606 (MGIB-SR) Ch. 1607 (REAP) Ch. 35 (DEA) Ch. 31 (Voc. Rehab)					
☐ Ch. 33* (Post 911 GI Bill) ☐ Ch. 33* (TOE) ☐ Ch. 33 (Fry Scholarship) ☐ TA ☐ Top-up ☐ Other					
VA File # (with letter or # suffix) (Ch. 35 only):	th letter or # suffix)		Military Branch:		Eligible Family Member: Relation-
Program type: Certificate B.A. M.A. M.A. K. K.S. Ed.S. Psy.D. Ph.D.					
Program Name:					
Term to start certifications					
		Online-blended programs: □ FA1 □ FA2 □ SP1 □SP2 □SU1 □SU2			
Fall Spring Summer Number of credit hours Expected to Enroll First Semester:		L FA1 L FA2 L SP1 L SP2 L SU1 L SU2 Starting Year			

\*Students claiming benefits under the Post 9/11GI Bill might be eligible for additional funds through the Yellow Ribbon Program. Only veterans entitled to the maximum benefit rate (based on service requirements) or their designated transferees may receive this funding. Active duty service members and their spouses are not eligible for this program (child transferees of active duty service members may be eligible if the servicemember is qualified at the 100% rate).

I understand that:

- All course work must be required for my approved degree in order to receive VA benefits.
- I must notify the VA Certifying Official of any changes in my enrollment (made after the add/drop deadline of each term/semester) and that such changes could impact my level of educational benefits including potential repayment of any overpayment.
- I am responsible for payment of the tuition and fees posted to my account.
- I have read the Military Education Benefit page on the school's website and understand my responsibilities when participating in this tuition assistance process.

By checking this box I acknowledge that typing my name below will serve as my electronic signature.

Signature

Date