Pronouns:



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: Military Benefits

Phone: 800.595.6938 option 2,3

Fax: 312.488.6336

Last Name:

Email:

Address, City, State, Zip:

Email: militarybenefits@thechicagoschool.edu

First Name:

Website: www.thechicagoschool.edu

By submitting this information, you are informing The Chicago School 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.

Preferred

Name:

For more information, see our website: https://www.thechicagoschool.edu/why-us/service-members-veterans-dependents/

Phone:

Type of benefit: Ch. 30 (MGIB) Ch. 1606 (I	MGIB-SR) 🗌 Ch. 1607 (REAP)	☐ Ch. 35 (DEA) ☐ Ch.	. 31 (VR&E)
☐ Ch. 33* (Post 911 GI Bill) ☐	☐ Ch. 33* (Transfer of Entitleme	nt) 🗌 Ch	ı. 33 (Fry Scholarship)
☐ TA ☐ Top-up ☐ Otl	her		
VA File # (with letter or # suffix) (Ch. 35 only):	Military Branch:	Check all that apply: Veteran Active Duty Active/Reserves	Eligible Family Member: Relation-
Program type: \square Certificate \square B.A. \square M.A. \square	M.S 🗌 Ed.S. 🗌 Psy.D. 🗌 Ph.[D.	
Program Name:			
Term to start certifications On Ground programs: ☐ Fall ☐ Spring ☐ Summer Number of credit hours expected to enroll first semester:	Online-blended programs: ☐Fall I ☐Fall 2 ☐Spring I Starting Year	□Spring II □Summer	I □Summer II
*Students claiming benefits under the Post 9/11GI Bill no the maximum benefit rate (based on service required duty service members may participate in the Yellow Ribmembers may be eligible if the service member is qualificunderstand that:	ments) or their designated transfer- bon Program. Spouses are not elig	ees may receive this funding	g. Effective Aug. 1, 2022, activ
All course work must be required.	d for my approved degree in ord	ler to receive VA benefits	
 I must notify the School Certifyir each term/semester) and that su repayment of any overpayment. 	uch changes could impact my le		
 I am responsible for payment of 	I am responsible for payment of the tuition and fees posted to my account.		
 I have read the Military Education participating in this tuition assist 		website and understand r	my responsibilities when
By checking this box I acknowledge that typing	my name below will serve as m	y electronic signature.	
Signature	Date		