

LINCOLN UNIVERSITY VA EDUCATION BENEFITS CERTIFICATION REQUEST

MILITARY & VETERANS SERVICES

(573) 681-5473
military@lincolnu.edu



901 Lafayette Street
223C Soldiers Hall
Jefferson City, MO 65101

Name: _____			SSN: _____
Last	First	MI	
Address: _____			Phone: _____
Street			
_____			LU Student ID#: _____
City	State	Zip	
Email: _____			
Major: _____			
<i>Has your major changed since the last time you received benefits?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO			
<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate	Semester: 20_____	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer

VA Chapter:

- ☐ Chapter 30: Montgomery GI Bill® – Active Duty
- ☐ Chapter 31: Vocational Rehabilitation & Employment (VR&E)
- ☐ Chapter 33: Post 9/11 GI Bill® (_____ %)
- ☐ Chapter 35: Survivors' & Dependents' Educational Assistance
VA File # _____ (Veteran's SSN)
- ☐ Chapter 1606: Montgomery GI Bill® - Selected Reserve

Student Classification:

- ☐ Service Member
(Branch: _____)
____ Active Duty (currently)
____ Guard (currently)
____ Reserve (currently)
____ Veteran
- ☐ Dependent (spouse/child)

Do you plan on using any of the following additional funding for the semester?

- ☐ Military Tuition Assistance (☐ Federal TA or ☐ State TA)
- ☐ Missouri Returning Heroes
(separate application must be submitted)
- ☐ Other Tuition-Based Scholarship
Name: _____

Student Status:

- ☐ First-time student at LU
- ☐ Continuing Student at LU
- ☐ Guest Student at LU
(include Parent School Letter)

Are you graduating this semester?

- ☐ YES ☐ NO

ENROLLMENT DATA:

	Prefix	Number	Section	Title of Course	Credits
EX.	ENG	101	01	COMP & RHET I	4
Total Credits:					
Tuition and Fees: (VA Office Use Only)					

STUDENT STATEMENT OF CERTIFICATION:

By submitting and signing this form, I acknowledge and agree to the following:

- I understand that the VA will only pay benefits for courses that are part of my approved degree program (that have not been previously completed with a passing grade) except when using "Rounding-Out", which may only be used in the final semester of attendance. If I enroll in non-required or repeated courses, these courses will not be submitted to the VA.
- I understand I must complete a new Benefits Certification Request form each semester in order to receive educational benefits.
- I understand I must report immediately any enrollment changes (adding/dropping/auditing). I understand I may be responsible to the VA for any overpayment due to registration changes.
- I understand I must attend class and make satisfactory academic progress. I understand School Certifying Officials (SCO) are required to report Academic Probation/Suspension to the VA.
- I understand I am responsible for payments of tuitions/fees not covered by the VA prior to the term beginning. (Please contact LU Student Accounts concerning payment plan options.)
- If applicable, I understand that the VA calculates my Monthly Housing Allowance using the term(s) start and end dates and is made based on my rate of pursuit. (For questions, contact the GI Bill Hotline 1-888-442-4551.)
- I understand that while VA payments should come on a regular basis, this is not guaranteed and I should plan accordingly to cover expenses.
- Ch. 30 or Ch. 1606 benefit students: I understand I must report school attendance to the VA at the end of each month in order to receive payment. I can report by phone 1-877-823-2378 or online at <https://www.gibill.va.gov/wave/index.do>.
- Chapter 33 students: I understand I am required to attach a copy of my most recent VA award letter or education enrollment status printout from eBenefits online at: <https://www.ebenefits.va.gov/ebenefits/homepage> (Manage - Education - Post 9/11 GI Bill® Enrollment Status).

Signature: _____

Date: _____

DEPARTMENT HEAD/ADVISOR/UNIVERSITY OFFICIAL:

The above named student is applying for VA Education Benefits through the VA School Certifying Official. Lincoln University is required by law to certify that all coursework for which the student receives benefits is applicable (required) toward the student's officially declared degree program.

I hereby certify that all courses noted above are applicable to the student's degree program.

Signature: _____

Date: _____