



VA BENEFIT CERTIFICATION FORM

Print & E-mail this form to: cfcc.va@mail.cfcc.edu or vacertifying@cfcc.edu

STUDENT ID: _____
 NAME: _____
 ADDRESS: _____
 PHONE #: _____
 EMAIL: _____

- Ch30 - Montgomery GI Bill
- Ch31 - Vocational Rehabilitation
- Ch 33 – Post-9/11 GI Bill
- Ch33(TOE) Post-9/11 Transfer
- Ch35 – Dependents Educational Assist.
- Ch1606-Reserves & National Guard

ACADEMIC PROGRAM: _____

ENROLLMENT TERM & YEAR: Fall Spring Summer Year: _____

Course Name	Course #	Credit Hours	Online (Y/N)	Add/Drop (A/D)	Repeated Y/N)

Please Initial the Following Points to Show You Are Aware of Certain Stipulations

- ___ Program evaluation plan provides the official list of course eligible for coverage under VA Education.
- ___ Courses take outside of the stated curriculum will be the student’s financial responsibility
- ___ Adding/dropping/withdrawing from/stop attending courses may impact you VA benefits or debt.
- ___ Tuition, fees, and books costs are governed by the VA Education Program you are using.
- ___ VA only pays for courses that apply to your chosen program.
- ___ The VA will not pay for the following courses: Online developmental courses, or Adult continuous Ed (CONED)
- ___ Full time status requires the following per term: Fall/Spring-12 credit hours, Sumer-8 credit hours
- ___ This contract will cover any schedule changes made to my account (drop/adds).
- ___ You will need to do a formal drop in the Registrars Office to drop any classes.
- ___ Classes must be dropped before the first day of the semester to avoid any charges.
- ___ Drops on or after the first day of the semester will result in you owing 25% for you dropped class(es)
- ___ Withdrawal after the 75% refund period will result in you owing 100% for your withdrawn class
- ___ If your arrangements are not met by the deadline, your account will be turned over to a state-contracted collection agency, and the N.C. Department of Revenue pursuant to N.C.G.S. 105A, the Set-Off Debt Collection Act, for collection. You are responsible for the costs or fees for collection account.

SIGNATURE: _____

DATE: _____