



### Veterans Benefits Certification Request

After enrolling for courses, complete section A and forward this form to your advisor. Your advisor will review your enrollment and then forward the form to Student Financial Services. For questions regarding the number of credits necessary for benefits call the VA at 1-888-442-4551. For VA direct deposit info call 1-800-827-1000.

#### SECTION A – STUDENT COMPLETES THIS SECTION.

Student Name: \_\_\_\_\_ Kirtland ID: \_\_\_\_\_

Program of Study: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
List the specific certificate/degree you are pursuing

CHECK ONE: ☐ Fall ☐ Winter ☐ Summer Number of credits to certify \_\_\_\_\_

Type of Benefits: \_\_\_\_\_ CHAPTER 30 \_\_\_\_\_ CHAPTER 33 (POST 9-11)  
\_\_\_\_\_ CHAPTER 1606 \_\_\_\_\_ CHAPTER 35

*I understand that all classes I am seeking benefits for must pertain to the program of study I am pursuing at Kirtland. I acknowledge that I am responsible for knowing the rules and regulations of the VA Educational program for which I receive benefits. I understand that I must submit a new certification request if my schedule changes (add/drop/withdraw).*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### SECTION B – ADVISOR USE ONLY

Program of study & Catalog Year \_\_\_\_\_ Eligible Credits: \_\_\_\_\_

Indicate any non-approved courses/credits: \_\_\_\_\_

Student repeating any previously completed courses? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
List specific course(s) numbers

Student completing a program of study this semester? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### SECTION C – STUDENT FINANCIAL SERVICES USE ONLY

Location: \_\_\_\_\_ # credits \_\_\_\_\_ \$ \_\_\_\_\_ tuition/fees PF Date: \_\_\_\_\_ Total \$ : \_\_\_\_\_  
Location: \_\_\_\_\_ # credits \_\_\_\_\_ \$ \_\_\_\_\_ tuition/fees  
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